# Case 18-09084 Doc 1 Filed 03/28/18 Entered 03/28/18 17:25:51 Desc Main Document Page 1 of 71

Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS	_	
Case number (if known)	Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this an amended filing

## Official Form 101

## Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pai	rt 1:	Identify Yourself		
			About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	You	ır full name		
	Writ	e the name that is on	Emely	
	pictu	r government-issued ure identification (for mple, your driver's	First name	First name
	licer	nse or passport).	Middle name	Middle name
	Brin	g your picture	Galarza	
		ntification to your eting with the trustee.	Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)
2.	use Inclu	other names you have d in the last 8 years ude your married or den names.	FKA Emely Colon	
3.	you nun Indi	y the last 4 digits of r Social Security nber or federal vidual Taxpayer ntification number	xxx-xx-0583	

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Debtor 1 Emely Galarza

Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names	I have not used any business name or EINs.  Business name(s)  EINs	☐ I have not used any business name or EINs.  Business name(s)  EINs
5.	Where you live	617 S. 6th Ave., Apt. 404	If Debtor 2 lives at a different address:
		Maywood, IL 60153 Number, Street, City, State & ZIP Code Cook	Number, Street, City, State & ZIP Code
		County	County
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code
6.	Why you are choosing this district to file for bankruptcy	Check one:  Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.  I have another reason. Explain. (See 28 U.S.C. § 1408.)	Check one:  Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.  I have another reason. Explain. (See 28 U.S.C. § 1408.)

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Case number (if known) Debtor 1 Emely Galarza

ar	Tell the Court About	Your E	3ankruptcy Ca	se			
7.	The chapter of the Bankruptcy Code you are	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.  Chapter 7					
	choosing to file under						
			Chapter 11				
			Chapter 12				
			Chapter 13				
3.	How you will pay the fee	•	about how yo	u may pay. Typ attorney is subr	pically, if you are paying the fee yo	with the clerk's office in your local court for more decurself, you may pay with cash, cashier's check, or malf, your attorney may pay with a credit card or check	oney
			I need to pay	the fee in inst	tallments. If you choose this optices (Official Form 103A).	n, sign and attach the Application for Individuals to F	<sup>2</sup> ay
			I request that	t my fee be wa	aived (You may request this option your fee, and may do so only if yo	only if you are filing for Chapter 7. By law, a judge rur income is less than 150% of the official poverty lin installments). If you choose this option, you must fill	e that
						ial Form 103B) and file it with your petition.	
).	Have you filed for bankruptcy within the	■ N					
	last 8 years?	☐ Y	es.				
			District		<del></del>	Case number	
			District		When	Case number	
			District		When	Case number	
0.	Are any bankruptcy cases pending or being	■ N	0				
	filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	□ Y	es.				
			Debtor			Relationship to you	
			District		When	Case number, if known	
			Debtor			Relationship to you	
			District		When	Case number, if known	
11.	Do you rent your residence?	ПΝ	o. Go to li	ine 12.			
	residence:	Y	es. Has yo	ur landlord obta	ained an eviction judgment agains	you?	
				No. Go to line	12.		
				Yes. Fill out Inbankruptcy pet		dudgment Against You (Form 101A) and file it with th	is

Document Page 4 of 71 Case number (if known) Debtor 1 Emely Galarza Part 3: Report About Any Businesses You Own as a Sole Proprietor Are you a sole proprietor No. of any full- or part-time Go to Part 4. business? Name and location of business ☐ Yes. A sole proprietorship is a business you operate as Name of business, if any an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. Number, Street, City, State & ZIP Code If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate Chapter 11 of the deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of Bankruptcy Code and are operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure you a small business in 11 U.S.C. 1116(1)(B). debtor? I am not filing under Chapter 11. No. For a definition of small business debtor, see 11 I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy □ No. U.S.C. § 101(51D). I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. ☐ Yes. Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have any ■ No. property that poses or is ☐ Yes. alleged to pose a threat of imminent and What is the hazard? identifiable hazard to public health or safety? Or do you own any If immediate attention is property that needs needed, why is it needed? immediate attention?

Number, Street, City, State & Zip Code

Where is the property?

For example, do you own perishable goods, or livestock that must be fed,

or a building that needs urgent repairs?

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Debtor 1 Emely Galarza

Case number (if known)

Part 5:

**Explain Your Efforts to Receive a Briefing About Credit Counseling** 

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

#### **About Debtor 1:**

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

	ıpacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### ☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

#### About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

#### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### □ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Case number (if known) Debtor 1 **Emely Galarza Answer These Questions for Reporting Purposes** Part 6: 16. What kind of debts do 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an you have? individual primarily for a personal, family, or household purpose." ☐ No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ☐ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under I am not filing under Chapter 7. Go to line 18. ■ No. Chapter 7? Do you estimate that I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses Yes. after any exempt are paid that funds will be available to distribute to unsecured creditors? property is excluded and administrative expenses No are paid that funds will be available for ☐ Yes distribution to unsecured creditors? 18. How many Creditors do **1**,000-5,000 **25,001-50,000** 1-49 you estimate that you **5001-10,000 5**0,001-100,000 **50-99** owe? **1**0,001-25,000 ■ More than 100,000 **1**00-199 □ 200-999 19. How much do you □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion **\$0 - \$50,000** estimate your assets to □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion □ \$50,001 - \$100,000 be worth? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion □ \$100,001 - \$500,000 ☐ More than \$50 billion □ \$100,000,001 - \$500 million □ \$500,001 - \$1 million 20. How much do you □ \$1,000,001 - \$10 million **\$0 - \$50,000** □ \$500,000,001 - \$1 billion estimate your liabilities □ \$50,001 - \$100,000 □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion to be? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion **\$100,001 - \$500,000** □ \$100.000.001 - \$500 million ■ More than \$50 billion □ \$500,001 - \$1 million Part 7: Sign Below For you I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11. United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Emely Galarza Signature of Debtor 2 **Emely Galarza** Signature of Debtor 1 Executed on Executed on March 21, 2018 MM / DD / YYYY MM / DD / YYYY

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Debtor 1 Emely Galarza Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Arthur	Corbin	Date	March 21, 2018
Signature of	Attorney for Debtor		MM / DD / YYYY
Arthur Co	rbin ARDC#6305658		
Printed name			
Corbin La	w Firm, LLC		
Firm name			
2500 E. De	evon Ave.		
Suite 200			
Des Plaine	es, IL 60018		
Number, Street,	City, State & ZIP Code		
Contact phone	773-570-0054	Email address	arthur@corbin-law.com
ARDC#630	05658 IL		
Bar number & S	tate		

Document Page 8 of 71 Fill in this information to identify your case: Debtor 1 **Emely Galarza** First Name Middle Name Last Name Debtor 2 (Spouse if, filing) First Name Middle Name Last Name United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number (if known)

☐ Check if this is an amended filing

## Official Form 106Sum

## **Summary of Your Assets and Liabilities and Certain Statistical Information**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

		Your a	ssets of what you own
1.	Schedule A/B: Property (Official Form 106A/B)  1a. Copy line 55, Total real estate, from Schedule A/B	\$	0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	22,369.88
	1c. Copy line 63, Total of all property on Schedule A/B	\$	22,369.88
Pai	t 2: Summarize Your Liabilities		
			abilities t you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	33,054.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)  3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	89,759.76
	Your total liabilities	\$	122,813.76
Paı	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	4,140.45
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	4,097.00
Pai	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13?  No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ur other scl	hedules.
7.	■ Yes What kind of debt do you have?		

household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

the court with your other schedules.

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Case number (if known)

8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

\$\_\_\_\_\_6,643.62

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total o	laim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	48,703.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	48,703.00

		Do	cument Page 10 of 7	1	
Fill in th	nis information to identify you	case and this filin	g:		
Debtor '	Emely Galarza				
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse, it		Middle Name	Last Name		
	<i>5,</i>				
United S	States Bankruptcy Court for the:	NORTHERN DIS	TRICT OF ILLINOIS		
Case nu	ımber				☐ Check if this is an
					amended filing
Offici	al Form 106A/B				
_	edule A/B: Prop	ortv			40/4E
			et only once. If an asset fits in more the	han and actoriony list the accet	12/15
hink it fit nformati	s best. Be as complete and accur	ate as possible. If two	o married people are filing together, b this form. On the top of any additiona	oth are equally responsible for	supplying correct
Part 1:	Describe Each Residence, Buildin	g, Land, or Other Rea	al Estate You Own or Have an Interest	: In	
. Do you	i own or nave any legal or equitab	ie interest in any resi	dence, building, land, or similar prope	erty ?	
■ No.	Go to Part 2.				
☐ Yes	s. Where is the property?				
Part 2:	Describe Your Vehicles				
i ait Z.	Describe rour vernicles				
			any vehicles, whether they are re		vehicles you own that
someone	e else drives. Ir you lease a venid	cie, also report it on	Schedule G: Executory Contracts a	ina Unexpirea Leases.	
B. Cars,	vans, trucks, tractors, sport u	tility vehicles, mot	orcycles		
□ No					
■ Ye	9				
3.1 N	<sub>lake:</sub> Toyota	Who has	an interest in the property? Check one		claims or exemptions. Put
N	Nodel: RAV 4 4Dr AWD LE	□ Debtor			ured claims on Schedule D: laims Secured by Property.
Υ	ear: <b>2018</b>	☐ Debtor	2 only	Current value of the	Current value of the
Α	pproximate mileage:	<b>1500</b> □ Debtor	r 1 and Debtor 2 only	entire property?	portion you own?
_	Other information:		st one of the debtors and another		
	urchased new in Decembe 017, for \$24,731.34.	☐ Check	t if this is community property structions)	\$22,000.00	\$11,000.00
			reational vehicles, other vehicles		
Exam	ples: Boats, trailers, motors, pers	sonal watercraft, fish	ning vessels, snowmobiles, motorcyc	cle accessories	
■ No					
☐ Ye					
			your entries from Part 2, includin		\$11,000.00
.page	es you have attached for Part 2	. Write that numbe	r here		\$11,000.00
Dort 2	Describe Vous Personal and 11	sobold Itama		-	
	Describe Your Personal and Hous own or have any legal or equi		v of the following items?		Current value of the
20 you	on or have any legal or equi	and intolest in all	, or allo following items:		portion you own?
					Do not deduct secured claims or exemptions.
					ao or onomphono.

6. **Household goods and furnishings** *Examples:* Major appliances, furniture, linens, china, kitchenware

☐ No

Official Form 106A/B Schedule A/B: Property

Debtor 1	Case 18-09084	Doc 1	Filed 03/28/18 Document	Entered 03/28/18 17:25:5 Page 11 of 71 Case number (if kno	
	Emely Galarza			Case number (ii kno	
■ Yes.	Describe				
	Ordina	ry furniture a	and consumer hous	sehold items.	\$150.00
□ No	les: Televisions and radios; including cell phones, c	ameras, media		ment; computers, printers, scanners; mu	sic collections; electronic devices  \$200.00
Example ■ No	ibles of value les: Antiques and figurines; other collections, memo			oks, pictures, or other art objects; stamp,	coin, or baseball card collections;
9. <b>Equipm</b> Example  No	ent for sports and hobbie		ner hobby equipment; I	picycles, pool tables, golf clubs, skis; can	pes and kayaks; carpentry tools;
□ No	<b>ms</b> ples: Pistols, rifles, shotguns  Describe	s, ammunition,	and related equipment		
	Springt	ield 9mm XC	OM pistol.		\$300.00
	Taurus	.22mm revo	lver.		\$200.00
□ No	ples: Everyday clothes, furs  Describe		•		
	Ordinal access		sary women's attir	e, costume jewelry, and	\$200.00
□ No		ume jewelry, ei	ngagement rings, wedd	ding rings, heirloom jewelry, watches, ger	ns, gold, silver
	Weddir	ng ring.			\$150.00
	Earring	s.			\$40.00
Exam <sub>l</sub> ■ No □ Yes.	arm animals  ples: Dogs, cats, birds, hors  Describe				
14. <b>Any ot</b> ☐ No	ther personal and househo	old items you	did not already list, ir	ncluding any health aids you did not lis	st .

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■ Yes	s. Give specific information			
	Family pho	otographs and misc. schoo	ol books.	\$50.0
	I the dollar value of all of your of Part 3. Write that number here	, ,	any entries for pages you have attached	\$1,290.00
	Describe Your Financial Assets			
Do you d	own or have any legal or equita	ble interest in any of the follow	wing?	Current value of the portion you own?  Do not deduct secured claims or exemptions.
■ No			posit box, and on hand when you file your pe	tition
		er financial accounts; certificates ultiple accounts with the same in	of deposit; shares in credit unions, brokerag stitution, list each.	e houses, and other similar
	S	Institution	name:	
	17.1. <b>che</b>	ecking Bank of	America	\$439.5
	17.2. <b>sa</b> v	vings Bank of	America	\$1,720.0
Exan	ls, mutual funds, or publicly tra	ecounts with brokerage firms, mo	oney market accounts	
☐ Yes	S Instit	ution or issuer name:		
9. <b>Non-</b> r	nublicly traded stock and inter	ests in incorporated and uning	corporated businesses, including an inter	est in an LLC nartnershin ar
joint	venture	-		est in an 220, partiersing, an
joint ■ No		t them	% of ownership:	est in an ELO, partitorsing, an
joint ■ No □ Yes  0. Gove Nego	venture s. Give specific information abou Name of	t them entity: and other negotiable and non-r	negotiable instruments omissory notes, and money orders.	ost in an ELO, partitorsing, an
joint ■ No □ Yes  0. Gove Nego Non- ■ No	s. Give specific information abou Name of rnment and corporate bonds a bitiable instruments include person	t thementity:  and other negotiable and non-r nal checks, cashiers' checks, pro you cannot transfer to someone	negotiable instruments omissory notes, and money orders.	ost in an EEO, partitorsing, an
joint No Yes  O. Gove Nega Non- No Yes  11. Retire	s. Give specific information about Name of strament and corporate bonds a partiable instruments include personance of the specific information about Issuer nament or pension accounts	t thementity:  and other negotiable and non-relation cannot transfer to someone them ame:	negotiable instruments omissory notes, and money orders.	
joint ■ No □ Yes 20. Gove Nego Non- ■ No □ Yes 21. Retire Exam	s. Give specific information about Name of strament and corporate bonds a partiable instruments include personance of the specific information about Issuer nament or pension accounts	entity:  and other negotiable and non-report checks, cashiers' checks, property of them came:  eogh, 401(k), 403(b), thrift saving	negotiable instruments omissory notes, and money orders. e by signing or delivering them.  gs accounts, or other pension or profit-sharing	

Official Form 106A/B Schedule A/B: Property page 3

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Debtor 1	Emely Galarza				ase number (if known)	
Yes.			Institution n	ame or individual:		
	reside	ntial lease	Held in tru Homes.	ust by landlord, May	wood Phoenix	\$1,500.00
	ies (A contract for a periodi	c payment of	money to you, either for	life or for a number of y	vears)	
■ No □ Yes	Issuer name	and descripti	ion.			
26 U.S.0	ts in an education IRA, in C. §§ 530(b)(1), 529A(b), an		n a qualified ABLE pro	gram, or under a qual	ified state tuition pro	gram.
■ No □ Yes	Institution na	ime and desc	ription. Separately file th	e records of any interes	sts.11 U.S.C. § 521(c):	
■ No	, equitable or future intere		rty (other than anythin	g listed in line 1), and	rights or powers exe	rcisable for your benefit
26. Patents Examp  ■ No	s, copyrights, trademarks bles: Internet domain names Give specific information a	, trade secre s, websites, p			s	
Examp ■ No	es, franchises, and other bles: Building permits, exclu	sive licenses,		n holdings, liquor license	es, professional licens	es
Money or	property owed to you?					Current value of the portion you own?  Do not deduct secured claims or exemptions.
□ No	funds owed to you					
■ Yes.	Give specific information at	oout them, inc	cluding whether you alrea	ady filed the returns and	the tax years	
			' federal tax refund. on 07 MAR 2018. Ma spend on reasonable expenses. Remainde bank account.	jority of refund e and necessary		\$0.00
□ No ´	support ples: Past due or lump sum Give specific information	,	usal support, child suppo	ort, maintenance, divorc	e settlement, property	settlement
			sonable and necessa \$200.00 bi-weekly.	ary child support:	Child Support	\$0.00
	amounts someone owes y oles: Unpaid wages, disabili benefits; unpaid loans	ty insurance p		efits, sick pay, vacation	pay, workers' compe	nsation, Social Security

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 $\square$  Yes. Give specific information..

Case 18-09084 Doc 1 Filed 03/28/18 Entered 03/28/18 17:25:51 Desc Main Document Page 14 of 71 Case number (if known) Debtor 1 **Emely Galarza** 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance Yes. Name the insurance company of each policy and list its value. Company name: Beneficiary: Surrender or refund value: Gerber Child Life Insurance, No \$0.00 surrender value. American Family Life. Term life policy. \$0.00 American Family Life. Term life policy. \$0.00 American Family Life. Whole life policy. \$0.00 Policy recently opened. No cash value. 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. ■ No ☐ Yes. Give specific information.. 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue ■ No ☐ Yes. Describe each claim....... 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims ■ No ☐ Yes. Describe each claim....... 35. Any financial assets you did not already list ■ No ☐ Yes. Give specific information... 36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached \$10,079.88 for Part 4. Write that number here..... Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1. 37. Do you own or have any legal or equitable interest in any business-related property? No. Go to Part 6. ☐ Yes. Go to line 38. Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1.

Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above

46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?

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■ No. Go to Part 7.

□ Yes. Go to line 47.

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ı	Do you have other property of any kind you did not already  Examples: Season tickets, country club membership  No  Yes. Give specific information	/ list?			
54.	Add the dollar value of all of your entries from Part 7. Writ	te that r	number here		\$0.00
Par	List the Totals of Each Part of this Form				
55.	Part 1: Total real estate, line 2				\$0.00
56.	Part 2: Total vehicles, line 5		\$11,000.00		
57.	Part 3: Total personal and household items, line 15		\$1,290.00		
58.	Part 4: Total financial assets, line 36		\$10,079.88		
59.	Part 5: Total business-related property, line 45		\$0.00		
60.	Part 6: Total farm- and fishing-related property, line 52		\$0.00		
61.	Part 7: Total other property not listed, line 54	+	\$0.00		
62.	Total personal property. Add lines 56 through 61		\$22,369.88	Copy personal property total	\$22,369.88

Official Form 106A/B Schedule A/B: Property page 6

63. Total of all property on Schedule A/B. Add line 55 + line 62

Debtor 1

\$22,369.88

Fill in this info	mation to identify your	case:		
Debtor 1	Emely Galarza			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States B	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				

## Official Form 106C

## Schedule C: The Property You Claim as Exempt

4/16

Specific laws that allow exemption

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Amount of the exemption you claim

Brief description of the property and line on

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
  - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
  - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Current value of the

Schedule A/B that lists this property	portion you own Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
2018 Toyota RAV 4 4Dr AWD LE 1500 miles	\$11,000.00	•	\$2,400.00	735 ILCS 5/12-1001(c)
Purchased new in December, 2017, for \$24,731.34. Line from Schedule A/B: 3.1			100% of fair market value, up to any applicable statutory limit	
Ordinary furniture and consumer household items.	\$150.00		\$150.00	735 ILCS 5/12-1001(b)
Line from Schedule A/B: 6.1			100% of fair market value, up to any applicable statutory limit	
Laptop, ipad, 3 TV sets, cellular phone, and printer.	\$200.00		\$200.00	735 ILCS 5/12-1001(b)
Line from Schedule A/B: 7.1			100% of fair market value, up to any applicable statutory limit	
Springfield 9mm XDM pistol. Line from Schedule A/B: 10.1	\$300.00		\$300.00	735 ILCS 5/12-1001(b)
Ellie Holli Gelledale PAB. 1911			100% of fair market value, up to any applicable statutory limit	
Taurus .22mm revolver. Line from Schedule A/B: 10.2	\$200.00		\$200.00	735 ILCS 5/12-1001(b)
LING HOTH GOLIEGUE PVD. 10.2			100% of fair market value, up to any applicable statutory limit	

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			Case number (if known)	
Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
Ordinary and necessary women's attire, costume jewelry, and	\$200.00		\$200.00	735 ILCS 5/12-1001(a)
accessories. Line from <i>Schedule A/B</i> : 11.1			100% of fair market value, up to any applicable statutory limit	
Wedding ring. Line from Schedule A/B: 12.1	\$150.00	-	\$150.00	735 ILCS 5/12-1001(a)
			100% of fair market value, up to any applicable statutory limit	
Earrings. ine from Schedule A/B: 12.2	\$40.00	•	\$40.00	735 ILCS 5/12-1001(b)
ine nom conedate / v.b. 1=1=			100% of fair market value, up to any applicable statutory limit	
Family photographs and misc.	\$50.00		\$50.00	735 ILCS 5/12-1001(b)
Line from Schedule A/B: <b>14.1</b>			100% of fair market value, up to any applicable statutory limit	
checking: Bank of America ine from Schedule A/B: 17.1	\$439.58		\$439.58	735 ILCS 5/12-1001(b)
			100% of fair market value, up to any applicable statutory limit	
savings: Bank of America	\$1,720.00	•	\$1,720.00	735 ILCS 5/12-1001(b)
			100% of fair market value, up to any applicable statutory limit	
RA: American Funds from Capital	\$6,420.30	•	\$6,420.30	735 ILCS 5/12-1006
Line from Schedule A/B: 21.1			100% of fair market value, up to any applicable statutory limit	
esidential lease: Held in trust by andlord, Maywood Phoenix Homes.	\$1,500.00		\$1,500.00	735 ILCS 5/12-901
ine from <i>Schedule A/B</i> : <b>22.1</b>			100% of fair market value, up to any applicable statutory limit	
Child Support: Reasonable and eccessary child support: \$200.00	\$0.00		100%	735 ILCS 5/12-1001(g)(4)
oi-weekly.			100% of fair market value, up to any applicable statutory limit	

	Ca	se 18-09084	Doc 1	Filed 0 Docu	3/28/18 ment		ed 03/28/18 17:25 8 of 71	5:51 Desc f	Main
Fill in	this inforr	nation to identify you	ır case:						
Debto	or 1	Emely Galarza First Name	Mic	ddle Name		Last Name			
Debto (Spouse	or 2 e if, filing)	First Name	Mic	ddle Name		Last Name			
United	d States Ba	nkruptcy Court for the	: NORTH	HERN DISTR	RICT OF ILL	INOIS			
Case (if know	number _								k if this is an ded filing
Offic	ial Forn	n 106D							
Sch	edule	D: Creditors	Who I	Have C	laims \$	Secure	ed by Property		12/15
is need numbe 1. Do a	led, copy the r (if known). ny creditors	e Additional Page, fill it have claims secured b	out, number y your prope	the entries, a	ind attach it t	o this form.	equally responsible for supp On the top of any additional You have nothing else to r	pages, write your na	
	Yes. Fill ir	all of the information	below.						
Part 1	List A	II Secured Claims							
for eac	h claim. If m	claims. If a creditor has ore than one creditor has ist the claims in alphabeti	s a particular	claim, list the o	other creditors	in Part 2. As	Amount of claim Do not deduct the	Column B Value of collateral that supports this	Column C Unsecured portion If any
		otor Credit	_				\$33,054.00	\$22,000.00	\$11,054.00
(	Corp. Creditor's Name			he property th			<del></del>	\$22,000.00	Ψ11,034.00
		iver Blvd. NE pids, IA	1500 mil Purchas for \$24,7 As of the capply.	sed new in 731.34. date you file, t	Decembe	r, <b>2017</b> ,			
_		· ·	☐ Conting	Jeni					

5005 N. River Blvd. NE Cedar Rapids, IA	1500 miles Purchased new in December, 2017, for \$24,731.34.  As of the date you file, the claim is: Check all that apply.
52411-6634	Contingent
Number, Street, City, State & Zip Code	☐ Unliquidated
Who owes the debt? Check one.	☐ Disputed  Nature of lien. Check all that apply.
☐ Debtor 1 only ☐ Debtor 2 only	An agreement you made (such as mortgage or secured car loan)
☐ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)
At least one of the debtors and another	☐ Judgment lien from a lawsuit
☐ Check if this claim relates to a community debt	Other (including a right to offset) car loan / PMSI

3368

\$33,054.00 Add the dollar value of your entries in Column A on this page. Write that number here: If this is the last page of your form, add the dollar value totals from all pages. \$33,054.00 Write that number here:

Last 4 digits of account number

#### Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Date debt was incurred 12/2017

	0430 10 0	0004 D001	Document	Page 1	9 of 71	0.01 000	o mani
Fill in t	his information to id	entify your case:					
Debtor	1 Emely (	Galarza					
Bobioi	First Name		fiddle Name	Last Name			
Debtor	2						
(Spouse if	f, filing) First Name	N	fiddle Name	Last Name			
United :	States Bankruptcy Co	urt for the: NORT	HERN DISTRICT OF IL	LINOIS			
Case no	umber						
(if known)						_	heck if this is an
						ar	nended filing
Officia	al Form 106E/F	=					
		_	ave Unsecured	Claims			12/15
					Part 2 for creditors with NO	NPRIORITY clain	
Schedule Schedule left. Attac	e G: Executory Contract e D: Creditors Who Hav ch the Continuation Pag d case number (if know	is and Unexpired Lease e Claims Secured by I ge to this page. If you n).	ses (Official Form 106G). Property. If more space is have no information to re	Do not include needed, copy	contracts on Schedule A/B: any creditors with partially the Part you need, fill it out do not file that Part. On the	secured claims to secured claims to secured claims to secured the entite the entitle the entite the entit the entit the entite the entit t	that are listed in ries in the boxes on the
Part 1:		RIORITY Unsecured					
	any creditors have prior	rity unsecured claims	against you?				
■ N	No. Go to Part 2.						
	Yes.						
Part 2:	List All of Your N	ONPRIORITY Unse	cured Claims				
3. Do a	any creditors have non	oriority unsecured cla	ims against you?				
	No. You have nothing to i	eport in this part. Subm	nit this form to the court with	n your other sch	edules.		
	Yes.						
unse	ecured claim, list the cred one creditor holds a par	litor separately for each	claim. For each claim liste	d, identify what	o holds each claim. If a cred type of claim it is. Do not list on three nonpriority unsecured	claims already incl	uded in Part 1. If more
							Total claim
4.1	Alexian Brothers	Health System	Last 4 digits of acc	count number	0583		\$140.65
	Nonpriority Creditor's Na	ame				-	· · · · · · · · · · · · · · · · · · ·
	Attn: Accounts Pa 800 Biesterfield R	•	When was the deb	t incurred?			
	Elk Grove Village						
-	Number Street City State		As of the date you	file, the claim	is: Check all that apply		
	Who incurred the debt	? Check one.					
	Debtor 1 only		☐ Contingent				
	Debtor 2 only		☐ Unliquidated				
	Debtor 1 and Debtor	2 only	☐ Disputed				
	☐ At least one of the de	=	Type of NONPRIO	RITY unsecure	d claim:		
	☐ Check if this claim		☐ Student loans				
	debt	-			aration agreement or divorce	that you did not	
	Is the claim subject to	offset?	report as priority cla				
	No		•	•	ng plans, and other similar de	ebts	
	☐ Yes		Other. Specify	Medical			

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4.2	Allilance Laboratory	Last 4 digits of account number 0583	\$156.90
	Nonpriority Creditor's Name PO Box 5968 Carol Stream, IL 60197	When was the debt incurred? 12/2015	
	Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify medical	
4.3	American Family Insurance	Last 4 digits of account number 3685	\$0.00
	Nonpriority Creditor's Name Processing Center #27 PO Box 55126	When was the debt incurred?	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Insurance. Notice Only.	
4.4	ARS	Last 4 digits of account number 7435	\$111.00
	Nonpriority Creditor's Name 1643 North Harrison Pkwy. Buiding H, Suite 100 Surise, FL 33323	When was the debt incurred? 02/2015	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	$\hfill \square$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	collections for Medical-Midwest Emergency  Other. Specify Associates	

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Debtor 1 Emely Galarza Case number (if know) \$164.00 4.5 ARS Last 4 digits of account number 8233 Nonpriority Creditor's Name 1643 North Harrison Pkwy. When was the debt incurred? 12/2016 Buiding H, Suite 100 Surise, FL 33323 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ■ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify collections for medical: MEA Elk Grove LLC ☐ Yes 4.6 AT&T Last 4 digits of account number 0583 \$629.00 Nonpriority Creditor's Name Bankruptcy Dept. When was the debt incurred? 2015 PO Box 769 Arlington, TX 76004 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims lacksquare Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify cable / internet services ☐ Yes 4.7 **Berkshire Communities** \$500.00 Last 4 digits of account number 0583 Nonpriority Creditor's Name 1150 Sanctuary Pkwy. #150 When was the debt incurred? 2013 Alpharetta, GA 30009 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Residential lease deficiency ☐ Yes

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Case number (if know)

Debioi	Elliely Galarza	Case Humber (II know)	
4.8	Berkshire Communities	Last 4 digits of account number 0583	\$999.00
	Nonpriority Creditor's Name 1150 Sanctuary Pkwy. #150 Alpharetta, GA 30009	When was the debt incurred? 05/2013	
	Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	□ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	□ Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify Residential lease deficiency	
4.9	Cavalry Portfolio Services	Last 4 digits of account number 1893	\$1,282.00
	Nonpriority Creditor's Name	Wiles was the debt in source do 2/204.4	
	500 Summit Lake Dr., Ste. 4A Valhalla, NY 10595	When was the debt incurred? 2/2014	
	Number Street City State ZIp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.  ☐ Debtor 1 only		
	Debtor 2 only	Contingent	
	Debtor 1 and Debtor 2 only	Unliquidated	
	_	☐ Disputed  Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another	Student loans	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	□ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify collections for GE Capital	
4.1	Cavalry Portfolio Services	Last 4 digits of account number 1979	\$1,721.00
0	Nonpriority Creditor's Name		• • • • • • • • • • • • • • • • • • • •
	500 Summit Lake Dr., Ste. 4A Valhalla, NY 10595	When was the debt incurred? 03/2016	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	$\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts	
	□Yes	collections or purchased from Citibank. Circuit Court of Cook County Case No.: 2016 M1 125512	

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Case number (if know) Debtor 1 Emely Galarza 4.1 Centrol DuPage Hospital 0583 \$25.00 Last 4 digits of account number Nonpriority Creditor's Name PO Box 4090 When was the debt incurred? Carol Stream, IL 60197 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify Medial 4.1 Citibank N.A. 0583 \$2,117.00 Last 4 digits of account number Nonpriority Creditor's Name Attn: Bankruptcy When was the debt incurred? 2014 PO Box 6500 Sioux Falls, SD 57117 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts credit card. sold or in collections to or by ☐ Yes Other. Specify Portfolio Recovery. Commonwelath Finance 6236 \$916.00 Last 4 digits of account number Nonpriority Creditor's Name 245 Main St. When was the debt incurred? 11/2013 Scranton, PA 18519 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify collections for medical: MEA St. Alexius ☐ Yes

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Case number (if know)

Elliely Galaiza	Case Humber (II know)	
Elmhurst Emergency Med. Svcs.  Nonpriority Creditor's Name	Last 4 digits of account number 0583	\$268.00
155 E. Brush Hill Rd.	When was the debt incurred? 2014	_
Elmhurst, IL 60126  Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	ne or and actor you may and oranni or orroom an area apply	
■ Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	□ Debts to pension or profit-sharing plans, and other similar debts	
□ Yes		
Tes	Other. Specify medical services	_
Elmhurst Memorial Healthcare	Last 4 digits of account number 0583	\$83.00
Nonpriority Creditor's Name 200 Berteau Ave.	When was the debt incurred? 2017	
Elmhurst, IL 60126	When was the dept incurred:	_
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed  Type of NONPRIORITY unsecured claim:	
At least one of the debtors and another	Student loans	
☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	■ Other. Specify medical services	_
Elmburgt Mamarial Hagnital	Last 4 digits of account number 3309	\$81.45
Elmhurst Memorial Hospital Nonpriority Creditor's Name	Last 4 digits of account number 3309	<b>401.43</b>
PO Box 4052	When was the debt incurred? 2014	
Carol Stream, IL 60197	- A of the late of the the late of the lat	_
Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	Constitution	
Debtor 2 only	☐ Contingent	
Debtor 1 and Debtor 2 only	☐ Unliquidated ☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other, Specify Medical	

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Case number (if know)

Enlery Galarza	Case number (i know)	
Fedloan Servicing	Last 4 digits of account number 0583	\$3,992.00
Nonpriority Creditor's Name POB 60610	When was the debt incurred? 12/2009	
Harrisburg, PA 17106  Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	Student loans	
debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you report as priority claims	did not
■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
□Yes	☐ Other. Specify	
	studentn loan	
FedIoan Servicing  Nonpriority Creditor's Name	Last 4 digits of account number 0583	\$5,897.00
POB 60610 Harrisburg, PA 17106	When was the debt incurred? 08/23/2011	
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	_	
Debtor 1 only	Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	Disputed	
$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	Student loans	
debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you report as priority claims	ı did not
■ No	Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify	
	student loan	
Fedloan Servicing	Last 4 digits of account number 0583	\$9,831.00
Nonpriority Creditor's Name POB 60610	When was the debt incurred? 08/2011	
Harrisburg, PA 17106  Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	, , , , , , , , , , , , , , , , , , , ,	
■ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	■ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you report as priority claims	ı did not
■ No	Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	☐ Other. Specify	
<del></del>		

student loan

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Debto	or 1 Emely Galarza	——————————————————————————————————————	Case number (if know)	
4.2 0	Fedloan Servicing	Last 4 digits of account number	0583	\$2,986.00
	Nonpriority Creditor's Name POB 60610	When was the debt incurred?	08/2012	
	Harrisburg, PA 17106  Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.	,		
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	☐ Yes	Other. Specify		
		student loa	n	
4.2				
4.2 1	Fedloan Servicing	Last 4 digits of account number	0583	\$4,680.00
	Nonpriority Creditor's Name POB 60610	When was the debt incurred?	08/2012	
	Harrisburg, PA 17106  Number Street City State Zlp Code  As of the date you file, the claim is: Check all that apply			
	Who incurred the debt? Check one.			
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	☐ Other. Specify		
		student loa	n	
4.2				
2	Gottlieb Memorial Hospital	Last 4 digits of account number	0700	\$9,603.00
	Nonpriority Creditor's Name PO Box 74867	When was the debt incurred?		
	Chicago, IL 60694  Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.	,	or onest an inat apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	Disputed		
	☐ At least one of the debtors and another	nother Type of NONPRIORITY unsecured claim:		
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	■ Other. Specify Medical Se	rvices	

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Debtor 1 Emely Galarza Case number (if know) 4.2 **Loyola University Medical Center** 0583 \$11,220.00 Last 4 digits of account number 3 Nonpriority Creditor's Name PO Box 3021 When was the debt incurred? Milwaukee, WI 53201 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify Medical 4.2 **Loyola University Medical Center** 8381 Last 4 digits of account number \$1,617.00 Nonpriority Creditor's Name PO Box 3021 When was the debt incurred? Milwaukee, WI 53201 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent ☐ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No Other. Specify Medical ☐ Yes 4.2 **Navient** 0583 \$3,157,00 Last 4 digits of account number Nonpriority Creditor's Name 123 Justison Street, 3rd Floor When was the debt incurred? 10/2006 Wilmington, DE 19801 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ☐ Unliquidated Debtor 2 only ☐ Disputed ☐ Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another Student loans ☐ Check if this claim is for a community debt  $\hfill\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims  $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ☐ Other. Specify

student loan

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Case number (if know)

Debi	Ciliely Galarza		Case Hulliber (II kilow)	
I.2	Navient	Last 4 digits of account number	0583	\$5,403.00
	Nonpriority Creditor's Name 123 Justison Street, 3rd Floor	When was the debt incurred?	07/2007	
	Wilmington, DE 19801  Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.	• ,		
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	Other. Specify		
		student loa	<u>In</u>	
1.2	Navient	Last 4 digits of account number	0583	\$5,276.00
	Nonpriority Creditor's Name 123 Justison Street, 3rd Floor Wilmington, DE 19801	When was the debt incurred?	10/2006	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	Other. Specify		
		student loa	ın	
1.2	Navient	Last 4 digits of account number	0583	\$7,481.00
	Nonpriority Creditor's Name 123 Justison Street, 3rd Floor Wilmington, DE 19801	When was the debt incurred?	07/2007	
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	lacksquare At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharir	g plans, and other similar debts	
	Yes	Other. Specify		
		student loa	ın	

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Case number (if know)

Debio	Elliely Galarza	Case number (II know)	
4.2 9	Northwestern Medicine	Last 4 digits of account number 0583	\$40.38
	Nonpriority Creditor's Name PO Box 4090	When was the debt incurred?	
	Carol Stream, IL 60197	Then was the dest mounted.	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify Medical	
4.3	Quest Diagnostics	Last 4 digits of account number 3051	\$295.36
	Nonpriority Creditor's Name	When was the debt incurred?	
	PO Box 809403 Chicago, IL 60680	when was the debt incurred?	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other. Specify Medical	
4.3	Pod Advantona	0500	<b>*</b> 40.00
1	Rad Advantage  Nonpriority Creditor's Name	Last 4 digits of account number 0583	\$49.00
	Lockbox 7262 PO Box 8500	When was the debt incurred?	
	Philadelphia, PA 19178		
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify Hobby goods	

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Debto	Emely Galarza		Case number (if know)	
4.3	Remington Place Apartments	Last 4 digits of account number	0583	\$4,093.00
	Nonpriority Creditor's Name 201 W. Remington Cir.	When was the debt incurred?	2013	· · · · · · · · · · · · · · · · · · ·
	Schaumburg, IL 60195 Number Street City State Zlp Code	As of the date you file, the claim	s: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	<u> </u>	Debts to pension or profit-sharin	a plane and other cimiler debte	
	No	·		
	Yes	Other. Specify Residential	lease deficiency	
4.3	Suburban Ears, Nose, Throat	Last 4 digits of account number	0583	\$285.22
3	Nonpriority Creditor's Name			Ψ200.22
	PO Box 3839	When was the debt incurred?		
	Carol Stream, IL 60132	_		
	Number Street City State Zlp Code	As of the date you file, the claim	s: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt		ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify Medical		
4.3	SYNBC/Walmart		5464	\$405.00
4	Nonpriority Creditor's Name	Last 4 digits of account number		\$405.00
	PO Box 965024 Orlando, FL 32896-5024	When was the debt incurred?	12/2016	
	Number Street City State Zlp Code	As of the date you file, the claim	s: Check all that apply	
	Who incurred the debt? Check one.	,		
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
	□ Yes	Other Specify retail charge		
	<b>∟</b> 1€5	( )ther Specify   Clair Clair	io account	

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Debtor 1 Emely Galarza Case number (if know) 4.3 TD Bank USA / Target Credit 8177 \$1,809.00 Last 4 digits of account number 5 Nonpriority Creditor's Name NCD-0450 05/2012 When was the debt incurred? PO Box 1470 Minneapolis, MN 55440 Number Street City State ZIp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No credit card. Judgment: Circuit Court of **Cook County** ☐ Yes Other. Specify 2014 M1 122005 4.3 Verizon Wireless (BK) 0583 \$535.00 Last 4 digits of account number 6 Nonpriority Creditor's Name Attn: Bankruptcy Dept. When was the debt incurred? 2015 1515 Woodfield Rd Schaumburg, IL 60173 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent □ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify cellular telephone service 4.3 Verizon Wireless (BK) Last 4 digits of account number 0583 \$628.00 Nonpriority Creditor's Name Attn: Bankruptcy Dept. When was the debt incurred? 2015 1515 Woodfield Rd Schaumburg, IL 60173 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims  $\square$  Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify cellular telephone servicese ☐ Yes

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Debtor 1 Emely Galarza Case number (if know) 4.3 Webbank 0583 \$783.00 Last 4 digits of account number 8 Nonpriority Creditor's Name 215 South State Street, Suite 100 When was the debt incurred? 2013 Salt Lake City, UT 84111 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Retail charge account ☐ Yes 4.3 0583 West Suburban Hospital \$499.80 Last 4 digits of account number Nonpriority Creditor's Name Dept. 4658 When was the debt incurred? Carol Stream, IL 60122 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts Other. Specify Medical ☐ Yes Part 3: List Others to Be Notified About a Debt That You Already Listed 5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page. Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? **Elmhurst Memorial Healthcare** Line 4.15 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 27535 Network PL. Part 2: Creditors with Nonpriority Unsecured Claims Chicago, IL 60673 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? **Enhanced Recovery Co.** Line 4.6 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims PO Box 57547 ■ Part 2: Creditors with Nonpriority Unsecured Claims Jacksonville, FL 32241 Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Name and Address Fair Collections & Outsourcing Line 4.7 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 12304 Baltimore Ave., Ste. E Part 2: Creditors with Nonpriority Unsecured Claims Beltsville, MD 20705 Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Name and Address Fair Collections & Outsourcing Line 4.8 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 12304 Baltimore Ave., Ste. E Part 2: Creditors with Nonpriority Unsecured Claims Beltsville, MD 20705

Official Form 106 E/F

Last 4 digits of account number

Entered 03/28/18 17:25:51 Case 18-09084 Doc 1 Filed 03/28/18 Desc Main Document Page 33 of 71 Case number (if know) Debtor 1 Emely Galarza Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? **Fair Collections and Out** Line 4.32 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 12304 Baltimore Ave., Ste. E Part 2: Creditors with Nonpriority Unsecured Claims Beltsville, MD 20705 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Jefferson Capital LLC Line 4.36 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 16 McLeland Rd. ■ Part 2: Creditors with Nonpriority Unsecured Claims Saint Cloud, MN 56303-2198 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? **Jefferson Capital LLC** Line 4.37 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 16 McLeland Rd. ■ Part 2: Creditors with Nonpriority Unsecured Claims Saint Cloud, MN 56303-2198 Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Name and Address Keith S. Shindler Line 4.10 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 1990 E. Algonquin #180 Part 2: Creditors with Nonpriority Unsecured Claims Schaumburg, IL 60173 Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Name and Address **MEA** Line 4.13 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims Alexian Brothers Medical Ctr ■ Part 2: Creditors with Nonpriority Unsecured Claims 800 Biesterfield Rd Elk Grove Village, IL 60007 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? **MEA Elk Grove LLC** Line 4.5 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims Alexian Brothers Medical Ctr ■ Part 2: Creditors with Nonpriority Unsecured Claims 800 Biesterfield Rd Elk Grove Village, IL 60007 Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Name and Address **MEA Elk Grove LLC** Line 4.5 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims PO Box 740023 ■ Part 2: Creditors with Nonpriority Unsecured Claims Cincinnati, OH 45274 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? **Medical Business Bureau** Line 4.14 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims PO Box 1219 ■ Part 2: Creditors with Nonpriority Unsecured Claims Park Ridge, IL 60068-7219 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? **Merchants Credit Guide** Line 4.15 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 223 W. Jackson Blvd., Ste. 700 Part 2: Creditors with Nonpriority Unsecured Claims Chicago, IL 60606 Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Name and Address Mever & Nius PA Line 4.35 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 33 N. Dearborn #1301 ■ Part 2: Creditors with Nonpriority Unsecured Claims Chicago, IL 60602 Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Name and Address Midland Credit Management, Inc Line 4.38 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims

2365 Northside Dr, Suite 300 San Diego, CA 92108

Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

On which entry in Part 1 or Part 2 did you list the original creditor?

Name and Address

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Debtor 1 Emely Galarza		Case number (if know)
Midland Funding LLC	Line <b>4.38</b> of ( <i>Check one</i> ):	☐ Part 1: Creditors with Priority Unsecured Claims
2365 Northside Drive, Suite 300		Part 2: Creditors with Nonpriority Unsecured Claims
San Diego, CA 92108	Last 4 digits of account number	
Name and Address	On which entry in Part 1 or Part 2 did	you list the original creditor?
Midwest Emergency Associates	Line 4.4 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims
901 MacArthur Blvd. Munster, IN 46321		■ Part 2: Creditors with Nonpriority Unsecured Claims
Mulister, IN 40321	Last 4 digits of account number	
Name and Address	On which entry in Part 1 or Part 2 did	you list the original creditor?
Nationwide Credit & Collections	Line <b>4.23</b> of ( <i>Check one</i> ):	☐ Part 1: Creditors with Priority Unsecured Claims
c/o Evergreen Bank Group PO Box 3219		Part 2: Creditors with Nonpriority Unsecured Claims
Oakbrook, IL 60522		
,	Last 4 digits of account number	
Name and Address	On which entry in Part 1 or Part 2 did	you list the original creditor?
Portfolio Recovery	Line <b>4.12</b> of ( <i>Check one</i> ):	☐ Part 1: Creditors with Priority Unsecured Claims
120 Corporate Blvd. Suite 100 Norfolk, VA 23502		Part 2: Creditors with Nonpriority Unsecured Claims
Nortolk, VA 23302	Last 4 digits of account number	
Name and Address	On which entry in Part 1 or Part 2 did	you list the original creditor?
State Collections	Line <b>4.29</b> of ( <i>Check one</i> ):	☐ Part 1: Creditors with Priority Unsecured Claims
PO Box 6250 Madison, WI 53716		Part 2: Creditors with Nonpriority Unsecured Claims
Madison, Wi 337 10	Last 4 digits of account number	
Name and Address	On which entry in Part 1 or Part 2 did	you list the original creditor?
Synchrony Bank	Line 4.9 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims
PO Box 965024 Orlando, FL 32896		■ Part 2: Creditors with Nonpriority Unsecured Claims
Oriando, i L 32030	Last 4 digits of account number	

#### Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				٦	Total Claim
	6a.	Domestic support obligations	6a.	\$	0.00
Total					
claims from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	0.00
				1	Total Claim
	6f.	Student loans	6f.	\$	48,703.00
Total claims					
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h.		6h.	\$	0.00
	6i.	<b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	41,056.76
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	89,759.76

			111 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
Fill in this infor	mation to identify your	case:		
Debtor 1	Emely Galarza			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				☐ Check if this
				amended fili

## Official Form 106G

## **Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease
Name, Number, Street, City, State and ZIP Code

2.1 Maywood Phoenix Home Rentals
Maywood, IL 60153

State what the contract or lease is for
Month-to-month residential lease. Debtor is lessee.

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		Document	Paue 30 UL / I	
Fill in th	is information to identify your	case:		
Debtor 1	<b>Emely Galarza</b>			_
	First Name	Middle Name	Last Name	
Debtor 2 (Spouse if,		Middle Name	Last Name	-
	-	NODTHERN DICTRICT OF	LLINOIC	
United S	States Bankruptcy Court for the:	NORTHERN DISTRICT OF	LLINOIS	-
Case nu	mber			
(if known)				Check if this is an
				amended filing
Offici	al Form 106H			
	dule H: Your Cod	ahtars		12/15
JCIIC	dule II. Tour Cou	entoi 3		12/15
eople a ill it out, our nan	re filing together, both are equal and number the entries in the ne and case number (if known)	ally responsible for supplying boxes on the left. Attach the . Answer every question.	g correct information. If more space	ccurate as possible. If two married e is needed, copy the Additional Page, ne top of any Additional Pages, write
Y	es			
			ty state or territory? (Community pr Rico, Texas, Washington, and Wiscon	
■ N	lo. Go to line 3.			
_	es. Did your spouse, former spou	ise, or legal equivalent live with	you at the time?	
	co. Dia your opouse, former spec	ioo, or logal oquivalent live with	r you at the time.	
in li Fori	ne 2 again as a codebtor only it	f that person is a guarantor o	r cosigner. Make sure you have lis	s filing with you. List the person shown ted the creditor on Schedule D (Official le D, Schedule E/F, or Schedule G to fil
	Column 1: Your codebtor Name, Number, Street, City, State and ZI	P Code		ne creditor to whom you owe the debt nedules that apply:
3.1	Albert Colon 302 Andover Ct. Streamwood, IL 60107		☐ Schedule	E/F, line4.9
3.2	Albert Colon 302 Andover Ct. Streamwood, IL 60107		■ Schedule □ Schedule	ED, line E/F, line4.32 G Place Apartments
3.3	Albert Colon 302 Andover Ct. Streamwood, IL 60107		■ Schedule □ Schedule	D, line E/F, line4.7 G Communities

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Case number (if known)

	Column 1: Your codebtor	Column 2: The creditor to whom you owe the debt Check all schedules that apply:
	Albert Colon	☐ Schedule D, line
	302 Andover Ct. Streamwood, IL 60107	■ Schedule E/F, line <u>4.8</u> □ Schedule G Berkshire Communities
	Albert Colon	☐ Schedule D, line
	302 Andover Ct.	■ Schedule E/F, line <b>4.16</b>
	Streamwood, IL 60107	☐ Schedule G Elmhurst Memorial Hospital
	Albert Colon	☐ Schedule D, line
	302 Andover Ct.	■ Schedule E/F, line4.3
	Streamwood, IL 60107	☐ Schedule G American Family Insurance
3.7	Albert Colon	☐ Schedule D, line
	302 Andover Ct.	Schedule E/F, line 4.39
	Streamwood, IL 60107	☐ Schedule G West Suburban Hospital
3.8	Terrell J. Pulliam	Cabadula D. Bras. 94
	617 S. 6th Ave., Apt. 404	■ Schedule D, line <u>2.1</u> □ Schedule E/F, line
	Maywood, IL 60153	☐ Schedule G
		Toyota Motor Credit Corp.

Debtor 1 **Emely Galarza** 

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Fill in this informa	tion to identify your case:	
Debtor 1	Emely Galarza	
Debtor 2 (Spouse, if filing)		
United States Bar	nkruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS	
Case number (If known)		Check if this is:  ☐ An amended filing ☐ A supplement showing postpetition chapter
Official Fo		13 income as of the following date:  MM / DD/ YYYY

### Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Fill in your employment information.		Debtor 1	Debtor 2 or non-filing spouse
If you have more than one job,	Employment status	■ Employed	■ Employed
attach a separate page with information about additional	Employment status	☐ Not employed	☐ Not employed
employers.	Occupation	Customer Service / Sales	Warehouse Manager
Include part-time, seasonal, or self-employed work.	Employer's name	Alliance Paper and Food Service	Alliance Paper and Food Service
Occupation may include student or homemaker, if it applies.	Employer's address	11058 W. Addison St. Franklin Park, IL 60131	11058 W. Addison St. Franklin Park, IL 60131

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

				For Debtor 1		Debtor 2 or filing spouse
2.	<b>List monthly gross wages, salary, and commissions</b> (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.	2.	\$_	2,845.50	\$	3,342.60
3.	Estimate and list monthly overtime pay.	3.	+\$_	0.00	+\$	0.00
4.	Calculate gross Income. Add line 2 + line 3.	4.	\$_	2,845.50	\$_	3,342.60

Official Form 106I Schedule I: Your Income page 1

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Debt	or 1	Emely Galarza	_	(	Case number (if ki	nown)				
					For Dobton 4		Г.,	Dahtan	2	
					For Debtor 1			Debtor -filing s		
	Con	y line 4 here	4.		\$ 2,845	5.50	\$		342.60	_
	OOP	y line 4 nere	•		2,040		Ψ_	,	J-2.00	<u>'</u>
5.	List	all payroll deductions:								
	5a.	Tax, Medicare, and Social Security deductions	5a		\$ 564	1.90	\$		790.10	1
	5b.	Mandatory contributions for retirement plans	5b		·	0.00	\$_		0.00	_
	5c.	Voluntary contributions for retirement plans	5c			5.40	\$-		100.30	_
	5d.	Required repayments of retirement fund loans	5d		·	0.00	\$_		0.00	_
	5e.	Insurance	5e		· :	0.30	\$_		167.60	_
	5f.	Domestic support obligations	5f.			0.00	\$_		534.60	_
	5g.	Union dues	5g		·	0.00	\$_		0.00	_
	5h.	Other deductions. Specify:	-	,. 1.+	· i — — · · · · · · · · · · · · · · · ·		+ \$		0.00	_
_			_		·		· · ·			_
6.		the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6. 7.			0.60	\$ \$		592.60	_
7.		culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$ 1,934	1.90	Φ_	1,	750.00	_
8.		all other income regularly received:								
	8a.	Net income from rental property and from operating a business, profession, or farm								
		Attach a statement for each property and business showing gross								
		receipts, ordinary and necessary business expenses, and the total								
		monthly net income.	8a		\$	0.00	\$		0.00	<u>.                                    </u>
	8b.	Interest and dividends	8b	).	\$	0.00	\$		0.00	<u></u>
	8c.	Family support payments that you, a non-filing spouse, or a dependent								
		regularly receive								
		Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	80		\$ 455	5.55	\$		0.00	1
	8d.	Unemployment compensation	8d			0.00	\$_		0.00	_
	8e.	Social Security	8e		·	0.00	\$_		0.00	_
	8f.	Other government assistance that you regularly receive	-		·		· —		0.00	<u></u>
	-	Include cash assistance and the value (if known) of any non-cash assistance	:							
		that you receive, such as food stamps (benefits under the Supplemental								
		Nutrition Assistance Program) or housing subsidies.	O.f		•		¢		0.00	
	0.0	Specify: Pension or retirement income	_ 8f.			0.00	\$_ \$		0.00	_
	8g. 8h.	Other monthly income. Specify:	8g	}. 1.+	·	0.00	· -			_
	OII.	Other monthly income. Specify.	_ 011	I. <del>T</del>	Ψ	0.00	- Ψ <u> </u>		0.00	
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	9	\$ 45!	5.55	\$		0.0	0
			-	Ľ			Ľ		0.0	
10	Cala	culate monthly income. Add line 7 + line 9.	10	φ	0.000.45	. 6		750.00	œ.	4 4 4 0 4 5
10.		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	\$ _	2,390.45	+ \$_	1,7	750.00	= \$ _	4,140.45
11.		e all other regular contributions to the expenses that you list in Schedule and contributions from an unmarried partner, members of your household, your		200	onto vour room	motoo	and			
		r friends or relatives.	uepe	siiu	ents, your room	mates	, and			
		not include any amounts already included in lines 2-10 or amounts that are not	availa	able	e to pay expens	es liste	ed in S	Schedule	<i>J</i> .	
	Spe	cify:			. , ,			11.	+\$	0.00
								ĺ		
12.		the amount in the last column of line 10 to the amount in line 11. The res								
	appl	e that amount on the Summary of Schedules and Statistical Summary of Certai	n Lia	ווומו	ties and Related	ı Data	, IT IT	12.	\$	4,140.45
	аррі	165								
									Combi	
12	Dos	you expect an increase or decrease within the year after you file this form	?						montn	ly income
10.	<b>5</b> 0,	No.	•							
	_	Yes Explain:								

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						1				
HIII	in this informa	tion to identify yo	our case:							
Deb	tor 1	Emely Galar	za			Chec	k if this is:			
An amended filing										
	tor 2 ouse, if filing)						A supplement snov 13 expenses as of	ving postpetition chapter the following date:		
(-1-	3,									
Unite	ed States Bankr	uptcy Court for the	: NORTH	IERN DISTRICT OF ILLIN	OIS		MM / DD / YYYY			
Case	e number									
(If kr	nown)									
						]				
Of	fficial Fo	rm 106J								
		J: Your	Exner	1888				12/1		
				If two married people ar	e filing together, b	oth are equa	ally responsible fo			
info	rmation. If m		eded, atta	ch another sheet to this						
Part 1.	t 1: Descr	ibe Your House	ehold							
	■ No. Go to									
	☐ Yes. <b>Doe</b>	s Debtor 2 live	in a separ	ate household?						
	□N	0	-							
			st file Offici	al Form 106J-2, <i>Expenses</i>	for Separate House	ehold of Debt	or 2.			
2.	Do vou have	e dependents?	□ No							
	Do not list D	•		Fill out this information for	Dependent's relat	ionshin to	Dependent's	Does dependent		
	Debtor 2.	ebior i and	Yes.	each dependent	Debtor 1 or Debto		age	live with you?		
	Do not state	the						□ No		
	dependents				Daughter		2	■ Yes		
								□ No		
					Son		7	Yes		
								□ No		
					Step-son		10	Yes		
								□ No		
3.	Do vour exp	enses include	П	No			<del></del>	☐ Yes		
	expenses of	f people other t	han 🕳	Yes						
	yourself and	d your depende	nts? —	103						
Part		ate Your Ongoi								
exp				uptcy filing date unless y y is filed. If this is a supp						
ln al	luda avnanaa	o maid far with .			f van kaan					
the	value of such	s paid for with i n assistance an	d have inc	government assistance i cluded it on <i>Schedule I:</i> \	our Income					
(Off	ficial Form 10	61.)					Your exp	enses		
4.		or home owners and any rent for the		ses for your residence. I	nclude first mortgag	e 4. \$		750.00		
		led in line 4:	- g							
	4a. Real e	estate taxes				4a. \$		0.00		
		rty, homeowner's	s, or renter	's insurance		4b. \$		0.00		
	•	•	-	ıpkeep expenses		4c. \$		0.00		
_		owner's associat				4d. \$		0.00		
5.	Additional r	nortgage payme	ents for yo	our residence, such as ho	me equity loans	5. \$		0.00		

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btor 1 Emely Galar	a	Case num	nber (if known)	-
Utilities:				
6a. Electricity, hea	natural gas	6a.	\$	195.00
6b. Water, sewer,	arbage collection	6b.	\$	0.00
6c. Telephone, ce	phone, Internet, satellite, and cable services	6c.	\$	362.00
6d. Other. Specify		6d.	\$	0.00
Food and housekee	ing supplies	7.	\$	950.00
Childcare and child	en's education costs	8.	\$	250.00
Clothing, laundry, a	d dry cleaning	9.	\$	225.00
). Personal care prod	cts and services	10.	\$	125.00
Medical and dental	xpenses	11.	\$	20.00
2. Transportation. Incl	de gas, maintenance, bus or train fare.			
Do not include car pa	ments.	12.	\$	225.00
<ol><li>Entertainment, club</li></ol>	, recreation, newspapers, magazines, and boo	oks 13.	\$	75.00
. Charitable contribu	ons and religious donations	14.	\$	0.00
5. Insurance.				
	ce deducted from your pay or included in lines 4			
15a. Life insurance		15a.	·	92.00
15b. Health insuran		15b.	·	0.00
15c. Vehicle insura		15c.	·	0.00
	Specify: Renter's and car insurance	15d.	\$	178.00
Specify:	taxes deducted from your pay or included in lines	s 4 or 20. 16.	\$	0.00
7. Installment or lease		170	¢	250.00
17a. Car payments		17a.	·	650.00
17b. Car payments	or Vehicle 2	17b.	·	0.00
17c. Other. Specify			·	0.00
17d. Other. Specify		17d.	\$	0.00
	mony, maintenance, and support that you did pay on line 5, <i>Schedule I, Your Income</i> (Officia		\$	0.00
	make to support others who do not live with <b>y</b>		\$	0.00
Specify:	make to support others who do not live with y	, <b>ou.</b> 19.	Ψ	0.00
	xpenses not included in lines 4 or 5 of this for		our Income.	
20a. Mortgages on		20a.		0.00
20b. Real estate tax		20b.	·	0.00
	owner's, or renter's insurance	20c.	·	0.00
• •	pair, and upkeep expenses	20d.	·	0.00
	ssociation or condominium dues	20d. 20e.		0.00
Other: Specify:	ssociation of condominatin dues		+\$	
. Other. Specify.			+0	0.00
2. Calculate your mon	nly expenses			
22a. Add lines 4 thro	gh 21.		\$	4,097.00
22b. Copy line 22 (m	nthly expenses for Debtor 2), if any, from Official	Form 106J-2	\$	
22c. Add line 22a and	22b. The result is your monthly expenses.		\$	4,097.00
3. Calculate your mon	nly net income.			
23a. Copy line 12 (	our combined monthly income) from Schedule I.	23a.	\$	4,140.45
	hly expenses from line 22c above.	23b.	-\$	4,097.00
1,7,7	-			-,
	onthly expenses from your monthly income.  ur monthly net income.	23c.	\$	43.45
For example, do you ex modification to the term:  No.		you expect your mortgage	payment to incre	
☐ Yes.   Ex	ain here: Step-son lives with debtor every	weekend and during	g vacations a	and holidays.

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Fill in this i	nformation to identify your	case:			
Debtor 1	Emely Galarza	eaco.			
DCDIOI 1	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing	j) First Name	Middle Name	Last Name		
United State	es Bankruptcy Court for the:	NORTHERN DISTRIC	T OF ILLINOIS		
Case number (if known)	er				☐ Check if this is an amended filing
Official F	Form 106Dec				
Decla	ration About a	an Individua	l Debtor's Sc	hedules	12/15
	oney or property by fraud in th. 18 U.S.C. §§ 152, 1341, Sign Below		kruptcy case can result ir	n fines up to \$250,000,	or imprisonment for up to 20
Did yo	ou pay or agree to pay some	eone who is NOT an atto	orney to help you fill out ba	ankruptcy forms?	
■ N	0				
□ Y	es. Name of person				uptcy Petition Preparer's Notice, and Signature (Official Form 119)
	penalty of perjury, I declare by are true and correct.	that I have read the sur	nmary and schedules filed	d with this declaration	and
X /s/	Emely Galarza		X		
Em	nely Galarza nature of Debtor 1		Signature of I	Debtor 2	

Date \_\_\_\_\_

Date March 21, 2018

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Fill	in this inforn	nation to identify you	case:			
Deb	otor 1	Emely Galarza				
Dak	otor 2	First Name	Middle Name	Last Name		
	use if, filing)	First Name	Middle Name	Last Name		
Uni	ted States Ba	nkruptcy Court for the:	NORTHERN DISTRICT C	OF ILLINOIS		
Cas	se number					
	own)					heck if this is an mended filing
						monaca ming
∩f	ficial Fo	rm 107				
			Affaire for Individ	luale Filing for B	ankruntov	4/4.0
			Affairs for Individ			4/16
					equally responsible for sup additional pages, write you	
		n). Answer every que			, additional pages, with yea	ii namo ana cacc
Par	t 1: Give D	Details About Your Ma	rital Status and Where You	Lived Before		
1.	What is you	r current marital statu	s?			
	<b>-</b>					
	<ul><li>■ Married</li><li>□ Not mar</li></ul>					
			lived annulance other than	untrana urau liura manu2		
2.	During the is	ast 3 years, nave you	lived anywhere other than t	wnere you live now?		
	No					
	☐ Yes. Lis	t all of the places you l	ived in the last 3 years. Do no	ot include where you live now	<b>'.</b>	
	Debtor 1 Pr	ior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
3.	Within the la	ast 8 years, did you ev	ver live with a spouse or leg	jal equivalent in a commun	ity property state or territory	? (Community property
state	es and territor	ies include Arizona, Ca	lifornia, Idaho, Louisiana, Nev	vada, New Mexico, Puerto Ri	co, Texas, Washington and W	isconsin.)
	■ No					
	☐ Yes. Ma	ake sure you fill out <i>Sch</i>	nedule H: Your Codebtors (Of	ficial Form 106H).		
Par	t 2 Explai	in the Sources of You	r Income			
	EXPIC.		- 111001110			
4.	Fill in the tota	al amount of income yo	nployment or from operatin u received from all jobs and a have income that you receive	all businesses, including part-		ndar years?
	_	.9 - , ,	,,			
	□ No □	I in the details.				
	Tes. Fil	in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and	Sources of income Check all that apply.	Gross income (before deductions
			and an anal apply.	exclusions)	The state of the s	and exclusions)
		of current year until	■ Wages, commissions,	\$7,454.19	☐ Wages, commissions,	
the	date you file	d for bankruptcy:	bonuses, tips		bonuses, tips	
			☐ Operating a business		☐ Operating a business	

Official Form 107

Debtor 1 Emely Galarza Document Page 44 of 71 Case number (if known)

					Dalita d		Dahira 0	
					Debtor 1	Grass income	Debtor 2	Grass income
					Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
			dar year: Decembe	r 31, 2017 )	■ Wages, commissions, bonuses, tips	\$32,581.28	☐ Wages, commissions, bonuses, tips	
					☐ Operating a business		☐ Operating a business	
				efore that: r 31, 2016 )	■ Wages, commissions, bonuses, tips	\$27,898.00	☐ Wages, commissions, bonuses, tips	
					☐ Operating a business		☐ Operating a business	
5.	Inc and win	lude ind d other nings. t each s	come regain public beni If you are f	rdless of wheth efit payments; iling a joint cas the gross inco	er that income is taxable. Ex- pensions; rental income; inte- e and you have income that	o previous calendar years? amples of other income are a rest; dividends; money collect you received together, list it o ately. Do not include income the	ted from lawsuits; royalties; an nly once under Debtor 1.	
					Debtor 1		Debtor 2	
					Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of income Describe below.	Gross income (before deductions and exclusions)
				ent year until ankruptcy:	Child Support (estimated)	\$1,250.00		
			dar year: Decembe	r 31, 2017 )	Child Support (estimated)	\$5,200.00		
				efore that: r 31, 2016 )	Child Support (estimated)	\$5,200.00		
Pa	rt 3:	Lis	t Certain P	avments You	Made Before You Filed for	Bankruptcv		
						• •		
6.	Are	eithe No.	Neither [	Debtor 1 nor D	s debts primarily consume bebtor 2 has primarily const personal, family, or househo	umer debts. Consumer debts	s are defined in 11 U.S.C. § 10	01(8) as "incurred by an
			During th	e 90 days befo	re you filed for bankruptcy, d	id you pay any creditor a total	of \$6,425* or more?	
			□ <sub>No.</sub>	Go to line 7				
			Yes	paid that cre not include	editor. Do not include paymer payments to an attorney for t	id a total of \$6,425* or more in this for domestic support oblig his bankruptcy case. Its after that for cases filed on	ations, such as child support	and alimony. Also, do
							or after the date of adjustifier	it.
	-	Yes.			r both have primarily consure you filed for bankruptcy, d	umer debts. id you pay any creditor a total	of \$600 or more?	
			□ No.	Go to line 7				
			■ Yes	include pay		id a total of \$600 or more and obligations, such as child supp		
	C.	oditor	'e Nama a	nd Address	Dates of nauma	ant Total amount	Amount you Was this	navment for

paid

still owe

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Case number (if known) Document Debtor 1 Emely Galarza

	Creditor's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Was this p	ayment for
	Toyota Motor Credit Corp. 5005 N. River Blvd. NE Cedar Rapids, IA 52411-6634	12/28/2017; 2/2/2018; 2/13/2018; 2/16/2018; 2/23/2018; 3/2/2018; 3/9/2018.	\$1,759.70	\$33,054.00	☐ Mortgao ☐ Car ☐ Credit C ☐ Loan Re ☐ Supplie ☐ Other	Card epayment rs or vendors
7.	Within 1 year before you filed for bankrupt <i>Insiders</i> include your relatives; any general part of which you are an officer, director, person in a business you operate as a sole proprietor. It alimony.	artners; relatives of any gen a control, or owner of 20% o	eral partners; partner r more of their voting	erships of which y g securities; and	ou are a gene any managing	ral partner; corporations agent, including one for
	No					
	☐ Yes. List all payments to an insider.					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason fo	r this payment
8.	Within 1 year before you filed for bankrupt insider? Include payments on debts guaranteed or cos  No		ments or transfer a	any property on	account of a o	debt that benefited an
	Yes. List all payments to an insider					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe		r this payment ditor's name
9.	Within 1 year before you filed for bankrupt List all such matters, including personal injury modifications, and contract disputes.  No Yes. Fill in the details.					
	Case title Case number	Nature of the case	Court or agency		Status of t	he case
	Portfolio Recovery vs. Emely Colon 2016M4003941	breach of contract	The Circuit Co County Maybrook Maywood, IL 6		☐ Pendin☐ On app☐ Conclu	eal
	Cavalry SPV LLC vs. Emely Galarza 2016 M1 125512	breach of contract	The Circuit Co County Maybrook Maywood, IL 6		■ Pendin □ On app □ Conclu	eal
10.	Within 1 year before you filed for bankrupt Check all that apply and fill in the details belo		erty repossessed, f	oreclosed, garn	ished, attache	ed, seized, or levied?
	■ No. Go to line 11. □ Yes. Fill in the information below.					
	Creditor Name and Address	Describe the Property		Dat	e	Value of the
		Explain what happened				property

Del	btor 1	Emely Galarza	Document	Page 46 of 71 Case number	(if known)	
		•				
11.	accou	n 90 days before you filed for bank unts or refuse to make a payment I No Yes. Fill in the details. litor Name and Address		?	stitution, set off any a  Date action was taken	amounts from your Amount
12.		n 1 year before you filed for bankro -appointed receiver, a custodian, o		operty in the possession of an		efit of creditors, a
	_	No ∕es				
Par	rt 5:	List Certain Gifts and Contribution	ns			
13.		n 2 years before you filed for bank No Yes. Fill in the details for each gift.	ruptcy, did you give any ç	gifts with a total value of more t	han \$600 per person <sup>•</sup>	?
	per p	with a total value of more than \$6 person on to Whom You Gave the Gift and		fts	Dates you gave the gifts	Value
	Addı		u			
14.	<b>=</b> 1	n 2 years before you filed for bank No Yes. Fill in the details for each gift or		gifts or contributions with a tota	al value of more than	\$600 to any charity?
	more Char	s or contributions to charities that e than \$600 'ity's Name 'ess (Number, Street, City, State and ZIP Coo		you contributed	Dates you contributed	Value
Par	rt 6:	List Certain Losses				
15.	Withi	n 1 year before you filed for bankrombling?	uptcy or since you filed fo	or bankruptcy, did you lose any	thing because of the	t, fire, other disaster
	_	No Yes. Fill in the details.				
		cribe the property you lost and the loss occurred		coverage for the loss surance has paid. List pending So of Schedule A/B: Property.	Date of your loss	Value of property lost
		3 Toyota Sienna damaged in accident.		y insurance company.	10/2017	\$1,500.00
Par	rt 7:	List Certain Payments or Transfer	rs			
16.	consi	n 1 year before you filed for bankru ulted about seeking bankruptcy or le any attorneys, bankruptcy petition	preparing a bankruptcy p	petition?	, ,	rty to anyone you
	_	No	, , , , , , , , , , , , , , , , , , , ,	2 0	,	
	_	Ves Fill in the details				

Yes. Fill in the details.

Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You Description and value of any property transferred

Date payment or transfer was made Amount of payment

Debtor 1 Emely Galarza Document Page 47 of 71 Case number (if known)

Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You	Description and value of any prope transferred	erty	Date payment or transfer was made	Amount of payment
Corbin Law Firm, LLC 2500 E. Devon Ave. Suite 200 Des Plaines, IL 60018 arthur@corbin-law.com	Attorney Fees		3/3/2018 (\$150.00) and 3/7/2018 (\$1,050.00)	\$1,200.00
CC Advising, Inc. 703 Washington Ave. Ste 200 Bay City, MI 48708 ccadvising.com	credit counseling course		3/6/2018	\$9.76
Within 1 year before you filed for bankruptcy, d promised to help you deal with your creditors of Do not include any payment or transfer that you list  No	or to make payments to your creditors		r transfer any propei	rty to anyone who
Yes. Fill in the details.  Person Who Was Paid  Address	Description and value of any proper transferred	erty	Date payment or transfer was made	Amount of payment
Within 2 years before you filed for bankruptcy, transferred in the ordinary course of your busin Include both outright transfers and transfers made include gifts and transfers that you have already lis No  Yes. Fill in the details.	ness or financial affairs? as security (such as the granting of a se			
Person Who Received Transfer Address Person's relationship to you	Description and value of property transferred		ny property or received or debts change	Date transfer was made
Schaumburg Toyota Inc. 875 W. Golf Rd. Schaumburg, IL 60194 Arm's length transaction	Trade-in of 2013 Toyota Sienna valued at \$11,000.00 and encumbered by PMSI with a balance of \$18,824.90.		credit of 0 towards a ota RAV 4 AWD	12/22/2017
Schaumburg Toyota Inc. 875 W. Golf Rd. Schaumburg, IL 60194	Down payment of \$2,708.96	Purchase RAV 4 AV	of 2018 Toyota VD LE	12/22/2017
Arm's length transaction				
Within 10 years before you filed for bankruptcy beneficiary? (These are often called asset-protect ■ No □ Yes. Fill in the details.		elf-settled tru	st or similar device o	of which you are a
Name of trust	Description and value of the prope	rty transferre	d	Date Transfer was made

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Case number (if known) Document

Debtor 1 Emely Galarza

Pa	art 8: List of Certain Financial Accounts,	Instru	ments, Safe Depos	it Boxes, and S	torage Uni	ts			
20.	Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions.								
	■ No								
	☐ Yes. Fill in the details.								
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)		st 4 digits of count number	Type of acco	ount or	Date account was closed, sold, moved, or transferred	before cl	balance osing or transfer	
21.	Do you now have, or did you have within cash, or other valuables?	1 year	before you filed fo	or bankruptcy, a	any safe de	posit box or other depos	itory for secu	urities,	
	■ No								
	Yes. Fill in the details.								
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)		Who else had ac Address (Number, State and ZIP Code)		Describe	the contents	Do you shave it?		
22	Have you stored property in a storage uni	it or ni	,	ır homo within '	1 year befo	ro you filed for bankrupte	.v2		
۷۷.	mave you stored property in a storage uni	it or pr	iace officer triair you	ii iioiiie witiiiii	i year bero	re you med for bankrupt	, y :		
	■ No □ Yes. Fill in the details.								
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)		Who else has or to it? Address (Number, State and ZIP Code)		Describe	the contents	Do you shave it?		
Pa	art 9: Identify Property You Hold or Contro	ol for	Someone Else						
23.				lude any prope	rty you bor	rowed from, are storing t	or, or hold ir	n trust	
	■ No □ Yes. Fill in the details.								
	Owner's Name		Where is the pro	perty?	Describe	the property		Value	
	Address (Number, Street, City, State and ZIP Code)		(Number, Street, City, Code)			and property			
Pa	art 10: Give Details About Environmental Ir	nforma	ation						
roi	r the purpose of Part 10, the following defini	ilions	арріу.						
Environmental law means any federal, state, or local statute or regulation concerning pollution, toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other regulations controlling the cleanup of these substances, wastes, or material.								dous or	
	Site means any location, facility, or prope to own, operate, or utilize it, including dis			environmental	law, wheth	ner you now own, operate	e, or utilize it	or used	
	Hazardous material means anything an er hazardous material, pollutant, contaminar			as a hazardou	s waste, ha	zardous substance, toxi	substance,		
Rep	port all notices, releases, and proceedings t	that yo	ou know about, reg	ardless of whe	n they occ	urred.			
	Has any governmental unit notified you th	-			•		mental law?		
	■ No								

Name of site

Address (Number, Street, City, State and

Governmental unit

ZIP Code)

Address (Number, Street, City, State and ZIP Code)

☐ Yes. Fill in the details.

Date of notice

Environmental law, if you

know it

Case 18-09084 Doc 1 Filed 03/28/18 Entered 03/28/18 17:25:51 Document Page 49 of 71 **Emely Galarza** Case number (if known) Debtor 1 25. Have you notified any governmental unit of any release of hazardous material? Nο Yes. Fill in the details. Name of site Governmental unit Environmental law, if you Date of notice Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and know it **ZIP Code**) 26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders. Nο Yes. Fill in the details. **Case Title** Court or agency Nature of the case Status of the Case Number Name case Address (Number, Street, City, State and ZIP Code) Part 11: Give Details About Your Business or Connections to Any Business 27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? ☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time A member of a limited liability company (LLC) or limited liability partnership (LLP) ☐ A partner in a partnership ☐ An officer, director, or managing executive of a corporation ☐ An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. **Employer Identification number Business Name** Describe the nature of the business **Address** Do not include Social Security number or ITIN. (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Dates business existed 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. Nο Yes. Fill in the details below. **Date Issued** Address (Number, Street, City, State and ZIP Code) Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Emely Galarza Signature of Debtor 2 **Emely Galarza** Signature of Debtor 1

Date March 21, 2018 Date

Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?

■ No

☐ Yes

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

■ No

☐ Yes. Name of Person \_\_\_\_\_. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

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Debtor 1 Emely Galarza

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Fill in this inform	ation to identify your o	case:			
Debtor 1	Emely Galarza				
Dahtar 0	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ban	kruptcy Court for the:	NORTHERN DIST	RICT OF ILLINOIS		
Case number					
(if known)					Check if this is an amended filing
					amended ming
Official For	m 108				
		n for Indiv	iduals Filing	<b>Under Chapter</b>	· <b>7</b> 12/15
<u> </u>			idaalo i iiiig	ondo: onapto:	12/13
	vidual filing under char		out this form if:		
_	claims secured by you ed personal property a		t expired.		
You must file this	form with the court were is earlier, unless the	ithin 30 days after y	ou file your bankruptcy		for the meeting of creditors, creditors and lessors you list
•	ople are filing together d date the form.	in a joint case, bot	h are equally responsibl	e for supplying correct info	ormation. Both debtors must
	nd accurate as possiblur name and case num		needed, attach a separa	te sheet to this form. On the	e top of any additional pages,
Part 1: List Yo	ur Creditors Who Have	Secured Claims			
For any credito information bel		rt 1 of Schedule D:	Creditors Who Have Cla	aims Secured by Property (	Official Form 106D), fill in the
Identify the cre	ditor and the property th	nat is collateral	What do you intend to secures a debt?	do with the property that	Did you claim the property as exempt on Schedule C?
Creditor's <b>To</b>	oyota Motor Credit C	orp.	☐ Surrender the proper ☐ Retain the property a	-	□ No
Description of	2019 Tayota DAV 4	4D* AWD I E	Retain the property a		■ Yes
property	2018 Toyota RAV 4 1500 miles	4DI AWD LE	Reaffirmation Agree  Retain the property a		
securing debt:	Purchased new in 2017, for \$24,731.3			<u> — </u>	
	ur Unexpired Personal				
in the information	below. Do not list rea	l estate Íeases. Une	xpired leases are leases		Leases (Official Form 106G), fill lease period has not yet ended.
Describe your ur	nexpired personal prop	erty leases		V	Vill the lease be assumed?
Lessor's name: Description of leas	boo			[	□ No
Property:	seu			ו	☐ Yes
Lessor's name:	and			Γ	□ No
Description of least Property:	sea			ו	□ Yes

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

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Deb	otor 1	Emely Galarza	Case number (if known)	
	sor's n		□ No	
	scription perty:	n of leased	ПУ	
1 10	porty.		☐ Yes	
	sor's n		□ No	
	scriptior perty:	n of leased	П у	
1 10	porty.		☐ Yes	
	sor's n		□ No	
	scriptior perty:	n of leased	ПУ	
1 10	perty.		☐ Yes	
	sor's n		□ No	
	scription perty:	n of leased	П.,	
1 10	perty.		☐ Yes	
Les	sor's n	ame:	□ No	
	scription perty:	n of leased		
FIU	perty.		☐ Yes	
Par	t 3:	Sign Below		
		alty of perjury, I declare that I have indica at is subject to an unexpired lease.	ted my intention about any property of my estate that secures a debt and any perso	nal
· ·	, /-/ 5:		V	
X		mely Galarza ly Galarza	X Signature of Debtor 2	
		ture of Debtor 1	orginates of Boston 2	
	<b>5</b> .			
	Date	March 21, 2018	Date	

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

## This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

## The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

### **Chapter 11: Reorganization**

\$1,167 filing fee

\$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

#### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

## Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

## Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: <a href="http://www.uscourts.gov/bkforms/bankruptcy\_forms.html">http://www.uscourts.gov/bkforms/bankruptcy\_forms.html</a>

### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

## Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: <a href="http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html">http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html</a>

In Alabama and North Carolina, go to: <a href="http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit">http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit</a> AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 18-09084 Doc 1 Filed 03/28/18 Entered 03/28/18 17:25:51 Desc Main Document Page 57 of 71

B2030 (Form 2030) (12/15)

# **United States Bankruptcy Court Northern District of Illinois**

In re	Emely Galarza		Case No.					
		Debtor(s)	Chapter	7				
	DISCLOSURE OF COMPI	ENSATION OF ATTOR	RNEY FOR DI	EBTOR(S)				
	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 201 compensation paid to me within one year before the fibe rendered on behalf of the debtor(s) in contemplation	ling of the petition in bankruptcy,	or agreed to be paid	to me, for service				
				1,200.00				
	Prior to the filing of this statement I have received	d	\$	1,200.00				
	Balance Due			0.00				
2.	The source of the compensation paid to me was:							
	■ Debtor □ Other (specify):							
3.	The source of compensation to be paid to me is:							
	■ Debtor □ Other (specify):							
4.	■ I have not agreed to share the above-disclosed com	mpensation with any other person u	unless they are mem	bers and associate	es of my law firm.			
	☐ I have agreed to share the above-disclosed competed copy of the agreement, together with a list of the results.				ıy law firm. A			
5.	In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:							
	<ul> <li>a. Analysis of the debtor's financial situation, and ren</li> <li>b. Preparation and filing of any petition, schedules, st</li> <li>c. Representation of the debtor at the meeting of cred</li> <li>d. [Other provisions as needed]</li> <li>All legal services required pursuant to</li> </ul>	tatement of affairs and plan which litors and confirmation hearing, an	may be required; d any adjourned hea	arings thereof;	ankruptcy;			
6.	By agreement with the debtor(s), the above-disclosed See the attached Chapter 7 Represent		service:					
		CERTIFICATION						
	I certify that the foregoing is a complete statement of a pankruptcy proceeding.	any agreement or arrangement for	payment to me for r	epresentation of the	ne debtor(s) in			
	March 21, 2018	/s/ Arthur Corbin						
_	Date	Arthur Corbin AR						
		Signature of Attorney Corbin Law Firm,						
		2500 E. Devon Av						
		Suite 200						
		Des Plaines, IL 60						

arthur@corbin-law.com

Name of law firm



# SERVICES AND FEE AGREEMENT PRE-FILING SERVICES CHAPTER 7 U.S. BANKRUPTCY CODE

This representation agreement ("Agreement") is between Emely Galarza ("Client" "You" or "Your"), an "assisted person," as defined under the U.S. Bankruptcy Code, and Corbin Law Firm, LLC ("CLF"), a "debt relief agency," as defined under the U.S. Bankruptcy Code, for pre-filing bankruptcy services as outlined in Paragraph 1 below.

- Client understands that this Agreement does not include representation for any post-filing services or representation in state court matters or any other tribunals.
- Client also understands that CLF's representation will be fully completed and that this
   Agreement will terminate once the chapter 7 petition is filed with the bankruptcy court.
- The parties are executing this Agreement with the intent of executing a second services and fee agreement for post-petition services within 7 days from the termination of this Agreement terminates.

Please be mindful that CLF's advice may change as your circumstances change and as CLF conducts a thorough evaluation of your matter. Changes in your circumstances may require a form of relief not originally contemplated — such as relief under Chapter 13 of the U.S. Bankruptcy Code or non-bankruptcy relief. Substantial changes in circumstances may also necessitate CLF to request a higher fee for attorney's fees.

Evaluate vous financial cityation (assets, dabte income eveneses, and vous coals)

## 1. Pre-Filing Services CLF will provide under this agreement. CLF will:

П	Evaluate your infancial situation (assets, debis, income, expenses, and your goals).
	Advise you about relief under both Chapter 7 and Chapter 13 of the U.S. Bankruptcy Code and about non-bankruptcy options (if applicable).
	Provide and explain all bankruptcy disclosures as required by the U.S. Bankruptcy Code.
	Assist you with assembling the necessary information and documents for your case.
	Prepare the voluntary petition, schedules, statements, creditor list, and verifications, (collectively the "Petition") for filing.
	Advise you about exemptions and apply the exemptions to your property.
	Notify your creditors (if necessary) that CLF is your lawyer.
	Communicate with creditors and respond to creditor requests.

- Assist you in deciding whether it is in your best interest to reaffirm secured obligations (if applicable).
- File the Petition with the Bankruptcy Court for the Northern District of Illinois.

#### 2. Total Fees and Costs:

Attorney's Flat Fee Retainer	Court Costs:	Credit Counseling:	Total to CLF:
\$150.00	installments	paid to provider by Glient	150.00

### **Advance Payment Retainer**

You agree to and understand that CLF will treat the retainer as an "advance payment retainer." This means that CLF will place the retainer into its general account and the retainer will become the property of CLF. You also understand that you have the option to require CLF to treat your retainer as a security retainer. But you have decided to proceed with an advance payment retainer because we both agree that an advance payment retainer is to your advantage as CLF will immediately start working on your case and the retainer will be earned immediately or within a short span of time, because it will keep the funds out of the reach of your creditors, and because CLF will not represent you under a traditional security retainer.

#### "Work Done" Basis

The retainer will be earned on a "work done" basis. This means that even if you decide not to proceed with your case the retainer will already be partially or fully earned because CLF will have expanded significant time and effort working with you and on your behalf. Therefore, if you terminate CLF's representation or if CLF withdraws its representation due to your breach of this Agreement, you may not be entitled to a refund or may only be entitled to a partial refund even if your case is not filed. CLF charges an hourly rate of \$250.00 per hour for attorney time and \$90.00 per hour for administrative staff time.

- Important Terms, Concepts, Consequences, and Principles. You agree to and understand the following:
  - ☐ Effect on Your Credit. Bankruptcy is a financial event. As such, like a late payment, a collections action, or a court judgment, the bankruptcy will appear on your credit report. The bankruptcy should appear under each creditor listing as well as under the public records section of the credit report. A chapter 7 bankruptcy will stay on your credit report for up to 10 years. The bankruptcy may have a negative effect on your credit score and it may negatively impact your ability to obtain future credit or refinancing.
  - Public Proceeding. Bankruptcy is a public proceeding that takes place in a federal court. Your case will be filed in the Bankruptcy Court for the Northern District of Illinois. As such, case records will be available to the public.

	Automatic Stay. This is the name for the bankruptcy protection. The automatic stay goes into effect the moment your case is filed. Therefore, keep in mind that calls, lawsuits, wage garnishments and other actions to collect may continue and liens can attach to your property until the bankruptcy case is filed; you may therefore permanently lose your property.				
	Dischargeability and Non-Dischargeability. Chapter 7 bankruptcy eliminates most but not all debts. Debts that are eliminated are referred to as "dischargeable" debts. Debts that cannot be eliminated are referred to as "non-dischargeable" debts. If applicable, CLF will advise you what debts will not be discharged (typically: student loans, parking tickets, child support, most taxes).				
	Property of the Bankruptcy Estate. The moment CLF files your Petition with the bankruptcy court, all your interests — whether legal or equitable or vested or contingent, anywhere in the world — will be transferred to the bankruptcy court and become the property of the bankruptcy estate.				
	Chapter 7 Trustee. An individual will be appointed to review the veracity of your Petition and to administer the bankruptcy estate. The review will include meeting with you in person.				
	<b>Bankruptcy Notices.</b> The bankruptcy court will notify all your creditors and interested parties about your bankruptcy case. Notices have to be generated and mailed. It may take up to 10 business days for the notices to reach your creditors. CLF will expedite notice to creditors as necessary (e.g. fax notice to stop wage garnishment).				
	Time Is of the Essence. Any delay by you to cooperate with CLF may disqualify you from the bankruptcy or otherwise adversely impact your case by affecting your eligibility or the breadth of the relief you are seeking. An example of this is a change in your income (as it may affect the <i>means test</i> calculation) or an action by your creditor (e.g. foreclosure sale or wage garnishment).				
	Creditors. All creditors must be included in your case; bankruptcy is not a pick-and-choose proceeding. This includes debts you owe to your friends and family, small debts, and even debts that are not dischargeable. CLF will assist you with disclosing all your creditors but, ultimately, you are the only one who knows about all your obligations. Debts that are not included may not be discharged.				
	o Secured Creditor: A creditor that has a lien on your property and can repossess or foreclose on your property if you default on payments (e.g. mortgage, car loan, furniture loan). The chapter 7 bankruptcy does not eliminate the lien and the creditor will continue to have a lien on your property even after you receive your discharge. Chapter 7 will only eliminate your personal liability on a dischargeable debt.				
	O Unsecured Creditor: A creditor that cannot take your property through repossession or foreclosure (e.g. credit cards, medical debts, student loans, etc), because an unsecured creditor does not have a lien on your property. The bankruptcy discharge will eliminate your personal liability on this obligation and your contractual relationship with the unsecured creditor will end.				
Yo	our Duties Under this Agreement:				
	<b>Cooperatation.</b> To cooperate with CLF by communicating and providing, in a timely manner, information and documents CLF may request as well as meeting with CLF to review and sign required documents.				

4.

Truthfullness. To provide accurate and complete information and documentation to CLF. Honest and accurate and complete disclosure is crucial because you will be submitting all information in your case under penalty of perjury. False, inaccurate, and incomplete information may lead to the loss of your right to a discharge of your debts as well as serious civil penalties and/or criminal prosecution.
<b>Reasonable Investigation.</b> To conduct a reasonable investigation into your matters when providing information and documents in support of your case. This means that you may have to take affirmative action to obtain the necessary information by contacting third parties to obtain records or by taking time to look through your own documents and records.
Notification and Changes of Circumstances. To notify CLF before making property and financial transactions you do not ordinarily make (such as acquiring or disposing of property with a value of \$500.00 or more). You also agree to notify CLF about changes in your circumstances, including but not limited to changes in property interests, debts, income, expenses, address, contact information, military service, and participation in any legal proceedings.
<b>Credit Use.</b> To stop using credit. Using credit before filing bankruptcy may cause serious problems with your case. Credit use on the eve of the bankruptcy filing may be a bankruptcy crime and may also be challenged by your creditors.
<b>Pre-Filing Credit Counseling Course.</b> To complete the pre-filing credit counseling course and obtain the certificate of completion from an approved credit counseling agency. Completion of this course is required, because without it CLF will not file your case.
Safekeeping of Property. To use in a reasonable manner, preserve, and keep safe, your property interests that have a value of \$500.00 or more. Destroying, hiding, or transferring property — whether or not it serves as collateral — may negatively affect your case as such actions may be construed as an attempt to keep the property away from your creditors.

- 5. Third-Party Authorizations. You authorize CLF to communicate with (to provide information and documents as well as to request information and documents) your current and former employers, creditors, and any other third-party (such as the IRS) CLF deems necessary.
- 6. Authorization to Pull Credit Report. You authorize CLF to obtain your credit report.

### 7. Termination.

- a. You may discharge CLF as your attorney at any time subject to payment of any fees owed to CLF for services rendered based on "work done" as explained above.
- **b.** CLF may withdraw its representation if you violate the duties outlined in this Agreement and the bankruptcy disclosures you received from CLF.
- c. CLF may withdraw its representation if there is a substantial change in your circumstances that was not contemplated at the time the original fee was negotiated and if CLF requests a higher fee of attorney services, and you do not agree to the higher fee.

- d. This agreement will automatically terminate and CLF's representation will end the moment CLF files your case. The parties will no longer owe any duties to each other under this Agreement and you may continue to prosecute the post-filing part of this case pm se, via another attorney, or choose to retain CLF for post-filing services. If the parties do not execute a post-filing services and fee agreement within 7 days from the date of filing of the Petition, CLF may withdraw its representation as your attorney. CLF will do this by filing a motion with the bankruptcy court.
- e. When seeking withdrawal as you attorney, CLF will abide with the Illinois Rules of Professional Conduct and Local Bankruptcy Rules for the United States Bankruptcy Court Northern District Illinois and the Local Rules for the United States District Court for the Northern District of Illinois.
- 8. Acknowledgement. You acknowledge that CLF provided you with and explained the documents listed below:
  - Bankruptcy Disclosure pursuant to 11 U.S.C. §§ 527(a)(1) and 342(b)
  - Bankruptcy Disclosure pursuant to 11 U.S.C. § 527(a)(2)
  - Bankruptcy Disclosure pursuant to 11 U.S.C. § 527(b)
  - Bankruptcy Disclosure pursuant to 11 U.S.C. § 527(c)
  - Bankruptcy Information Sheet
- 9. Filing of Your Chapter 7 Voluntary Petition with the Bankruptcy Court. CLF will file your case with the bankruptcy court only if:
  - a. You have completed the credit counseling requirement.
  - b. You have provided all the information and documents CLF requested.
  - c. You sign and date the Petition after personally reviewing the Petition with your CLF attorney.

Arthur Corbin	Date: 3/3/70/8
CLIENT:	
Name EMELY GALARZA	Name
Signature Child Sales	Signature
Date: 3/3/2017	Date:

### CHAPTER 7 POST-FILING REPRESENTATION AND FEE AGREEMENT (the "Agreement")

I, Emely Galarza ("You" or "Client"), agree to retain Corbin	Law Firm, LLC ( "CLF" "We"), to represent Client in post-
filing proceedings in Chapter 7 Bankruptcy Case No.	filed under the United States Bankruptcy Code (the "Case").

Corbin Law Firm, LLC is considered a "debt relief agency" as defined by the Bankruptcy Code because we help individuals seek relief under the U.S. Bankruptcy Code. Client is an "assisted person" as defined by the Bankruptcy Code.

#### 1. ATTORNEY'S FEES

ATTORNEY'S FEES. You will pay CLF a flat fee of \$1,050.00 for attorney's fees for the "Standard Services" (described below
in Par. 2) under this Agreement. If Client does not sign and return this Agreement by 2018-03-27, CLF will withdraw as your
attorney pursuant to the Standing Order of the Bankruptcy Court for the Northern District of Illinois and will not perform
any more work in your Case.

Attorney's Fees are:

**DATE DUE** 

**AMOUNT** 

**Method of Payment:** 

#### **Advance Payment Retainer**

You agree to and understand that CLF will treat the retainer as an "advance payment retainer". This means that CLF will place the retainer into its general account and the retainer will become the property of CLF. You also understand that you have the option to require CLF to treat your retainer as a security retainer. But you have decided to proceed with an advance payment retainer because we both agree that an advance payment retainer is to your advantage as CLF will immediately start working on your case and the retainer will be earned immediately or within a short span of time, and because it will keep the funds out of the reach of your creditors.

## "Work Done" Basis

The retainer will be earned on a "work done" basis. This means that even if you decide not to proceed with your case the retainer will already be partially or fully earned because we will have expanded significant time and effort working with you and on your behalf. Therefore, if you terminate CLF's representation or if CLF withdraws its representation due to Client's breach of this Agreement, you may not be entitled to a refund or may only be entitled to a partial refund even if your case is not filed. CLF charges an hourly rate of \$250.00 per hour for attorney time and \$90.00 per hour for administrative staff time.

### 2. STANDARD SERVICES. CLF will provide the following services:

- a. Assist you in negotiating a reaffirmation agreement(s) when necessary and if requested by you;
- Prepare you for the initial trustee meeting ("Trustee Meeting");
- Assemble and provide to the chapter 7 trustee all documents as required by the Bankruptcy Code;
- d. Represent you at the Trustee Meeting or provide another attorney (after notice to you);
- e. Communicate with the U.S. Trustee, the case trustee, your creditors, and other parties of interest as necessary;
- Prepare motions to remove liens on your personal property under 11 U.S.C. 522(f)(2) and judicial liens under 11 U.S.C. 522(f)(1), but only if agreed to in the pre-filing retention agreement. If not agreed to in the pre-filing retention agreement, avoidance of a lien is not included under this Agreement. Please also see Par. 6, below;
- File the debtor's education course certificate (second credit counseling course);

- n. Monitor the case, communicate with Client, meet with Client, as necessary;
- i. Provide notices of the case to your creditors to stop lawsuits, wage garnishments, citations to discover assets, utility shutoffs, driver's license suspensions (if the bankruptcy automatic stay applies), etc.
- 3. ADDITIONAL SERVICES. CLF will provide these services for an additional fee. You agree that CLF will provide the following services, if necessary, and CLIENT AGREES TO PAY CLF for these services as they are necessary to you obtaining your discharge:
  - Amendments to Schedules: \$100 plus postage for mailing notices;
  - Amendments to Schedules to add omitted creditor(s): \$150 plus postage for mailing notices; plus \$31 court costs;
  - Representation at continued trustee meeting: \$250;
  - Representation at Rule 2004 Examination: Hourly Rate of \$250.00/hr.
- 4. SERVICES THAT ARE NOT SPECIFICALLY OUTLINED IN THIS AGREEMENT ARE NOT INCLUDED IN THE REPRESENTATION. Examples of services that are not included under the Agreement are: (1). Matters in a different court or tribunal (e.g. state court, administrative agency, etc.) (2.) Matters unrelated to this case (e.g. fixing credit report errors). (3.) Bankruptcy court hearings. (4.) Prosecuting or defending motions. (5) Prosecuting or defending adversary proceedings. (6) Redemption of property.
- 5. OTHER COMMON BANKRUPTCY SERVICES NOT PART OF THIS AGREEMENT.
  - Reopen case (usually due to your failure to take the second credit counseling course);
  - Conversion from Chapter 7 to Chapter 13.
- 6. CLIENT MAY HIRE CLF FOR EXCLUDED SERVICES. Client may retain CLF or any other attorney of Client's choice to represent Client for any services not included under this Agreement. Client may retain CLF, if CLF agrees to represent Client, by signing a separate retention agreement and paying a separate retainer.

### 7. YOUR DUTIES:

- Cooperation. You agree to cooperate with CLF in prosecuting your case. You also agree to cooperate with the case trustee
  and the U.S. Trustee and to provide requested information and documents in a timely manner. You also agree to update
  CLF about changes to your circumstances including: income, expenses, property interests (acquisition or disposition),
  address, contact information, and military service. You also agree to be present and on time for all hearing and meetings.
- Truthfulness. You agree to provide accurate and complete information, documentation, and testimony during this
  proceeding including at the Trustee Meeting. Honest and accurate and complete disclosure is crucial as inaccurate or
  incomplete disclosures can lead to the loss of your right to a discharge of your debts as well as serious civil and criminal
  prosecution.
- Notify CLF Before Acting. You must promptly notify CLF before making property and financial transactions that you do not
  normally make as you conduct your affairs. This includes: giving money to family or friends, withdrawing money from any
  retirement account, incurring new debt (such as purchasing a car, using a credit card, taking out a payday loan, etc.), selling
  or giving away property of any kind with a value of more than \$500.00. Such transactions may negatively impact your case
  as they can be undone by the trustee and you may lose that property and your right to a discharge of your debts.

- Complete the Second Credit Counseling Course (Debtor Education Course). You must complete the second credit
  counseling course (also known as the Debtor Education Course or the Financial Management Course). If you do not
  complete this course your case will be closed without a discharge.
- Attend the Trustee Meeting. You must appear at the Trustee Meeting. This meeting will take place 4 to 8 weeks after your
  case is filed. CLF will prepare you for this meeting and attend the meeting with you or, with your approval, provide another
  attorney.
- Notify CLF of New Interests in Property. You agree to promptly inform CLF of an inheritance, life insurance proceeds,
  lottery winnings, or property received in a spousal property settlement agreement or divorce within 6 months after the
  case is filed.
- Safeguard Your Property. You agree to safeguard your property while this Case is pending. This includes maintaining any insurance policies on property that serves as collateral (e.g. car if car loan; real estate of mortgage).
- 8. COMMUNICATIONS AND PERMISSIONS. You authorize CLF to communicate with your employer(s), creditors, and any other entity CLF deems necessary by telephone (work, home, cellular), by fax, mail, and email. You also authorize CLF to fax, mail or email pages of the Petition or any other documents CLF deems necessary to your employer(s), creditors, and to any other third parties CLF deems necessary.

#### 9. TERMINATION.

- a) You may discharge CLF at any time subject to payment of any fees owed for services rendered by CLF based on "work done" as explained above.
- b) CLF may withdraw its representation when CLF believes you are not complying with your duties as outlined in this Agreement and in the bankruptcy disclosures. When seeking withdrawal from the Case, CLF will abide to the Illinois Rules of Professional Conduct and Local Bankruptcy Rules for the United States Bankruptcy Court, Northern District of Illinois.
- 10. COLLECTION COSTS. If Client breaches this Agreement, Client will be responsible for all costs and reasonable attorney's fees CLF incurs in enforcing this Agreement.

Corbin Law Firm\_LLC

by Artbur Corbin

Emely**'**Galarza

Date

# **United States Bankruptcy Court Northern District of Illinois**

In re	Emely Galarza		Case No.	
		Debtor(s)	Chapter 7	
	V	ERIFICATION OF CREDITOR M	IATRIX	
		Number of	Creditors:	49
	The above-named Debtor(s (our) knowledge.	s) hereby verifies that the list of credit	tors is true and correct to	the best of my

Albert Colon 302 Andover Ct. Streamwood, IL 60107

Alexian Brothers Health System Attn: Accounts Payable 800 Biesterfield Road Elk Grove Village, IL 60007

Allilance Laboratory PO Box 5968 Carol Stream, IL 60197

American Family Insurance Processing Center #27 PO Box 55126 Boston, MA 02205

ARS 1643 North Harrison Pkwy. Buiding H, Suite 100 Surise, FL 33323

AT&T
Bankruptcy Dept.
PO Box 769
Arlington, TX 76004

Berkshire Communities 1150 Sanctuary Pkwy. #150 Alpharetta, GA 30009

Cavalry Portfolio Services 500 Summit Lake Dr., Ste. 4A Valhalla, NY 10595

Centrol DuPage Hospital PO Box 4090 Carol Stream, IL 60197

Citibank N.A. Attn: Bankruptcy PO Box 6500 Sioux Falls, SD 57117 Commonwelath Finance 245 Main St. Scranton, PA 18519

Elmhurst Emergency Med. Svcs. 155 E. Brush Hill Rd. Elmhurst, IL 60126

Elmhurst Memorial Healthcare 200 Berteau Ave. Elmhurst, IL 60126

Elmhurst Memorial Healthcare 27535 Network PL. Chicago, IL 60673

Elmhurst Memorial Hospital PO Box 4052 Carol Stream, IL 60197

Enhanced Recovery Co. PO Box 57547 Jacksonville, FL 32241

Fair Collections & Outsourcing 12304 Baltimore Ave., Ste. E Beltsville, MD 20705

Fair Collections and Out 12304 Baltimore Ave., Ste. E Beltsville, MD 20705

Fedloan Servicing POB 60610 Harrisburg, PA 17106

Gottlieb Memorial Hospital PO Box 74867 Chicago, IL 60694

Jefferson Capital LLC 16 McLeland Rd. Saint Cloud, MN 56303-2198 Keith S. Shindler 1990 E. Algonquin #180 Schaumburg, IL 60173

Loyola University Medical Center PO Box 3021 Milwaukee, WI 53201

MEA

Alexian Brothers Medical Ctr 800 Biesterfield Rd Elk Grove Village, IL 60007

MEA Elk Grove LLC Alexian Brothers Medical Ctr 800 Biesterfield Rd Elk Grove Village, IL 60007

MEA Elk Grove LLC PO Box 740023 Cincinnati, OH 45274

Medical Business Bureau PO Box 1219 Park Ridge, IL 60068-7219

Merchants Credit Guide 223 W. Jackson Blvd., Ste. 700 Chicago, IL 60606

Meyer & Njus PA 33 N. Dearborn #1301 Chicago, IL 60602

Midland Credit Management, Inc 2365 Northside Dr, Suite 300 San Diego, CA 92108

Midland Funding LLC 2365 Northside Drive, Suite 300 San Diego, CA 92108

Midwest Emergency Associates 901 MacArthur Blvd.
Munster, IN 46321

Nationwide Credit & Collections c/o Evergreen Bank Group PO Box 3219 Oakbrook, IL 60522

Navient 123 Justison Street, 3rd Floor Wilmington, DE 19801

Northwestern Medicine PO Box 4090 Carol Stream, IL 60197

Portfolio Recovery 120 Corporate Blvd. Suite 100 Norfolk, VA 23502

Quest Diagnostics PO Box 809403 Chicago, IL 60680

Rad Advantage Lockbox 7262 PO Box 8500 Philadelphia, PA 19178

Remington Place Apartments 201 W. Remington Cir. Schaumburg, IL 60195

State Collections PO Box 6250 Madison, WI 53716

Suburban Ears, Nose, Throat PO Box 3839 Carol Stream, IL 60132

SYNBC/Walmart PO Box 965024 Orlando, FL 32896-5024

Synchrony Bank PO Box 965024 Orlando, FL 32896 TD Bank USA / Target Credit NCD-0450 PO Box 1470 Minneapolis, MN 55440

Terrell J. Pulliam 617 S. 6th Ave., Apt. 404 Maywood, IL 60153

Toyota Motor Credit Corp. 5005 N. River Blvd. NE Cedar Rapids, IA 52411-6634

Verizon Wireless (BK) Attn: Bankruptcy Dept. 1515 Woodfield Rd Schaumburg, IL 60173

Webbank 215 South State Street, Suite 100 Salt Lake City, UT 84111

West Suburban Hospital Dept. 4658 Carol Stream, IL 60122